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FORTIETH ANNUAL  
REPORT

OF THE

Department  
of Health

FOR THE YEAR ENDING DECEMBER 31, 1924

# FORTIETH-ANNUAL REPORT

OF THE

## Department of Health

[DEPARTMENT OF PUBLIC AFFAIRS]

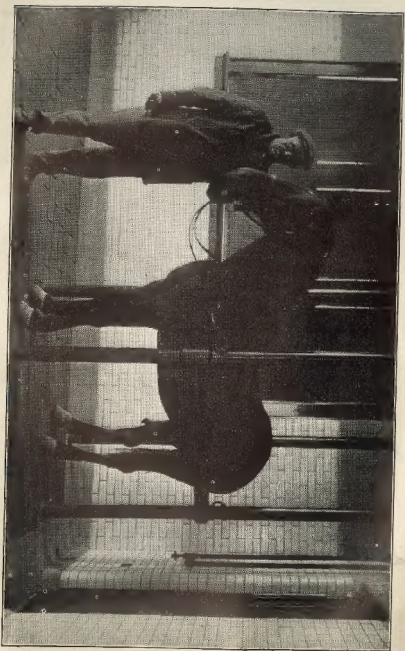
CITY OF NEWARK, NEW JERSEY



FOR YEAR ENDING DECEMBER 31, 1924

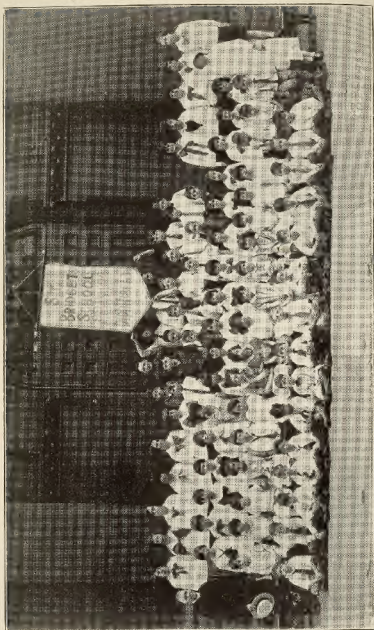
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BROWN HIRD

*This faithful horse saves babies' lives—gives over 600 doses of anti-toxin annually at New Ivy Hill Stable.*



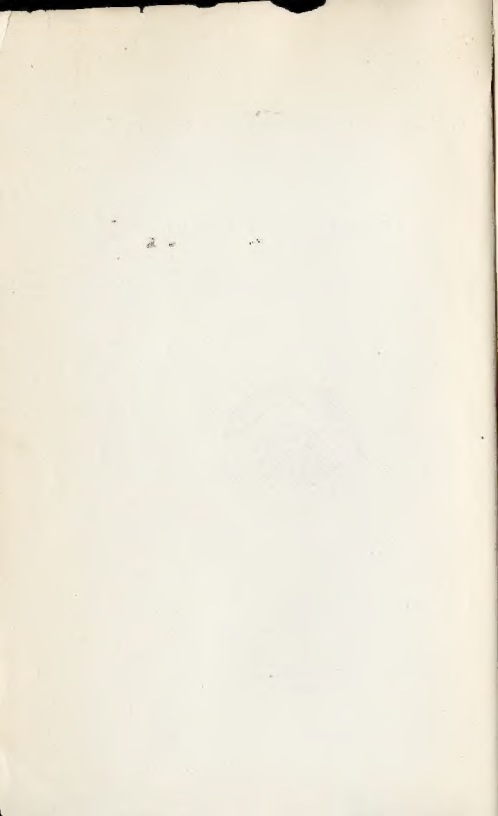
WITH THE COMPLIMENTS OF THE  
DEPARTMENT OF HEALTH  
OF NEWARK, N. J.

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THIS DEPARTMENT WOULD BE GLAD TO RECEIVE  
YOUR PUBLICATIONS IN RETURN

CHARLES V. CRASTER, M.D., D.P.H.  
HEALTH OFFICER.





## VACCINATION

"Let us then no longer be told of the contemptible origin of that benign remedy, which Providence has destined for the preservation of our offspring from a loathsome and destructive plague."—*From a letter addressed to the Boston Board of Health by Benjamin Waterhouse, M.D., May 31, 1802.*

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The record for 1924 is one of a low general mortality for the City of Newark. Many minor epidemic diseases however were prevalent during the year, the control of which is in the hands of the individual householder whose co-operation is essential if unnecessary sickness and suffering is to be avoided.

CHARLES V. CRASTER, M.D., D.P.H.,  
*Health Officer.*

Newark, April 15, 1925.

Acknowledged



**DEPARTMENT OF HEALTH**  
[DEPARTMENT OF PUBLIC AFFAIRS]

CITY OF NEWARK

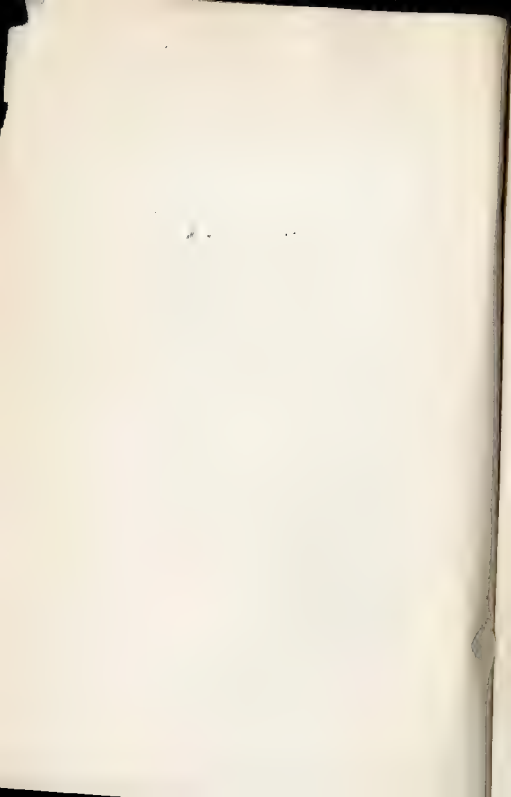
*Director*.....FREDERICK C. BREIDENBACH, Mayor  
*Health Officer*.....CHARLES V. CRASTER, M.D., D.P.H.

OFFICES

Headquarters, Plane and William Streets.....Phone 3310 Mitchell  
City Dispensary, Plane and William Streets.....Phone 3310 Mitchell  
Laboratories (Bacteriological, Pathological and Serological)  
Hospital Building, 116 Fairmount Avenue.....Phone 9300 Market  
*Chemist*, H. B. BALDWIN, 927 Broad Street.....Phone 1100 Mulberry

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## EMPLOYEES OF THE DEPARTMENT OF HEALTH

## EXECUTIVE DIVISION

CHARLES V. CRASTER.....	Health Officer
DAVID D. CHANDLER (Retired) .....	Health Officer
WILLIAM J. BUSHLER .....	Clerk-Bookkeeper
ROBERT F. MORGAN.....	Clerk-Stenographer
HENRY A. HABIG .....	Clerk-Stenographer
GRACE O'CONNOR .....	Clerk-Typist
MARCELLA DELACEY .....	Telephone Operator
MALCOLM H. NTER .....	Multigraph Operator
ELBERT S. BALL.....	Clerk, Vital Statistics
CORA B. NATHAN.....	Clerk
AUGUST W. JARGOSCH .....	Janitor
JAMES P. MADDEN.....	Night Custodian
CHARLES A. HARTMAN.....	Janitor
JOSEPH COLLINS.....	Chauffeur

## SANITARY DIVISION

WILLIAM L. YOUNG.....	Chief Clerk
ANDREW J. BRADY .....	Chief Sanitary Inspector

## Health Inspectors

LEWIS E. BOUTILLIER.....	BERNARD J. CAHILL
ADOLPH O. ELSASSER.....	CHARLES N. M. LAUGHLIN
	JOHN A. DONATON

## Sanitary Inspectors

WILLIAM HOPPER.....	GUSTAVUS E. FRIEDEMANN
HUBERT O'ROURKE.....	CLARENCE J. PALMER
ANTONIO PANZERA.....	EDWARD A. CLEARY
PATRICK J. KEATING.....	THOMAS P. WALSH
JAMES J. WATERS.....	EDWARD GAYNOR
HENRY MACDONALD.....	JAMES I. MCCARRON
JAMES WHELAN.....	EDMUND A. RYAN
EDWARD J. FLYNN.....	WILLIAM KRANE
CHARLES E. DIVINE.....	ROCCO J. DEL TUFO
HOWARD HUFFERT.....	EDWARD A. SMITH
PATRICK J. BROLAN.....	CHRISTOPHER C. NUGENT

## JOSEPH F. MCCONNELL

JOHN P. ROGERS.....	Clerk-Stenographer
ARTHUR VISCOSE .....	Clerk-Stenographer

## DEPARTMENT OF PUBLIC AFFAIRS

## PLUMBING DIVISION

CHARLES A. HALLGRING.....*Chief Plumbing Inspector*  
 JENNIE McNALLY.....*Clerk*

*Inspectors*

ANDREW J. MCGOOKIN.....JACOB KULL  
 DANIEL MURPHY.....JOHN L. WHEALAN  
 PATRICK J. MONAGHAN.....JOHN LEVINE

## FOOD AND DRUG DIVISION

SAMUEL G. SHARWELL.....*Chief Food and Drug Inspector*  
 HALSEY DURAND.....*Chemist*

*Food and Drug Inspectors*

JOSEPH E. CONNOLLY.....ADOLPH E. HOERNIG  
 HENRY F. KNELLER.....WILLIAM G. HEILMANN  
 FRANK C. KREITLER.....HENRY KUHMANN

JOHN C. PROSCHE

*Milk Inspectors*

RICHARD JACKSON.....DAVID E. MORGAN  
 CATHERINE E. MAHONEY.....*Clerk-Typist*  
 ANTONIO GAJO.....*Clerk-Stenographer*

## VETERINARY MEAT INSPECTION BUREAU

WERNER RUNGE.....*Chief*  
 JOHN N. WITTMANN.....*Veterinarian*  
 OTTO R. IFIS.....*Internarian*

*Meat Inspectors*

DANIEL KUHN.....CHARLES EDELHAUSER  
 HARRY A. BRYDEN.....WILLIAM J. MERKLIN

CHARLES ROSENZWEIG

GRACE E. McNALLY.....*Stenographer-Clerk*

## DISINFECTING DIVISION

IRWIN C. DAKIN.....*Chief Disinfecting Inspector*  
 MARY F. MCGUINNESS.....*Clerk-Stenographer*  
 GRACE E. WEHL.....*Clerk*

*Sanitary Inspectors*

RICHARD J. CORBLEY.....THOMAS F. NEWTON  
 GEORGE W. GILMORE.....LEO G. DUFFY  
 GEORGE A. VAN HOLTEN.....HARRY SHEPHERD  
 FREDERICK W. NICHOLS.....OBADIAH S. CLAY  
 GARRETT E. ST. JOHN.....WILLIAM S. JENNINGS

JOSEPH WILLIAM GARDAM.....*Chief Physician*

## DEPARTMENT OF HEALTH

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## PAROCHIAL SCHOOL INSPECTION

*Nurses*

ANNA FULTON  
FLORENCE M. MAWER  
SUZANNE A. SADLER

MARY E. CUNTON  
ANNA LIEBLER  
ELEANOR FAHY

## DISTRICT PHYSICIANS

WATSON F. L. ROEMANN  
THOMAS J. KELLY  
ABRAHAM ROTHBERG

WILLIAM T. RUMAGE  
MEYER JEDEL  
M. J. COFFEY

## CITY DISPENSARY

HENRY OITMAN	Apothecary
ARTHUR F. WARREN	Assistant Apothecary
JOSEPH A. SCHRAMM, M.D.	Clinic Physician
Alice I. D. KAN	Record Nurse
ELLA S. HARTON	Nurse
LEO J. McMANUS	Dentist
J. L. H. GUTHRIE	Dentist
NATHAN B. HELLER, M.D.	Pathologist
PHILIP BAYNE	Masscur
CHARLES ROSE	Masscur
CLARA B. McLELAND	Masscur
MARY A. BAYER	Masscur
MARGARET PELTZAN	Masscur
LOUISE MILLER	Masscur
VAN S. HURFURT	Janitor
ROSE MOORE	Cleaner and Helper
MARY B. GRANT	Cleaner and Fielder

## BUREAU OF VENEREAL DISEASE CONTROL

H. J. F. WATKINS, M. D.	Director
EARL LEROY WOOD, M.D.	Assistant Director
MELVINA H. RYAN	Record Nurse
EDNA B. W. SMITH	Visiting Nurse
JAMES CENTANNI	Attendant
JACOB F. SCHAEFFER	Attendant
MARY V. BRENNEN	Attendant

## DEPARTMENT OF PUBLIC AFFAIRS

## LABORATORY

R. N. CONNOLLY, M.D.	.....	Bacteriologist
THOMAS RIPLEY, M.D.	.....	Assistant Bacteriologist
H. A. TARBELL, M.D.	.....	Assistant Bacteriologist
G. WARD DISBROW, M.D.	.....	Assistant Bacteriologist
H. S. MARTLAND, M.D.	.....	Pathologist
CHARLES F. CONRAD	.....	Health Inspector
JOHN F. DUNN	.....	Culture Collector
WILLIAM J. FOYLE	.....	Culture Collector
THOMAS CROGHAN	.....	Clerk-Typist
MARY FUREY	.....	Laboratory Assistant
WILBUR FLOCK	.....	Laboratory Assistant
CHARLES GARABANTI	.....	Stableman

## TUBERCULOSIS DIVISION

M. J. FINE, M.D.	.....	Director
WILLIAM H. GREEN, M.D.	.....	Clinic Physician
IRVING WILLNES, M.D.	.....	Clinic Physician
JULIUS SOBIN, M.D.	.....	Clinic Physician
LOUIS DAVIS, M.D.	.....	Clinic Physician

## Visiting Nurses

EVA PRICE	RUTH LAFSLEY
KATHERINE ROTH	FREDERIKA HAYE
MARTHA I. HUNT	KATHERINE CHARL
CORNELIA WHITEHEAD	JEANNETTE S. LAWRENCE

FLORENCE F. BEAKER

KATHLEEN B. O'TOOLE.....Clerk Stenographer

## CHILD HYGIENE DIVISION

JULIUS LEVY, M.D.	.....	Director
ARTHUR J. ELLIS, M.D.	.....	Clinic Physician
HARRY B. SILVER, M.D.	.....	Clinic Physician
CLARENCE S. JANIFER, M.D.	.....	Clinic Physician
SIDNEY B. RAWITZ, M.D.	.....	Clinic Physician

## Visiting Nurses

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SARAH LAMBERT	PAULINE COCOZZA
EDITH EVANS	ELIZABETH EGBERT
HELEN C. O'MALLEY	FLORENCE M. SMITH

VISITING NURSES *Continued*

FLORENCE E. FREEMAN

EDITH C. BOYCE

LAUREL A. STREIT

IDA E. LONG

ROSE LUNDMAN

MARGARET P. CULLEN

HAZEL PADDOCK

ANNA T. RUSLEY

ANNA SCANLON

AGNES KEMPSON

LORETTA LYONS

ROSALIE GROSS ..... *Clerk Stenographer*ROSE CONDURSE ..... *Cleaner and Helper*





ANNUAL REPORT

OF THE

**Health Officer**



ANNUAL REPORT  
OF THE  
**Health Officer**

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*To the Honorable Fred C. Breidenbach, Mayor,  
Director of Public Affairs.*

DEAR SIR:—I have the honor to submit to you the report  
of the Department of Health for the year 1924.

Respectfully,

CHARLES V. CRASTER, M.D., D.P.H.,  
*Health Officer.*

THE FORTIETH ANNUAL REPORT

The report for 1924 marks the fortieth year of the publication of this record of department work. Forty years ago the activities of Health Departments were confined within very narrow limits, to the recording of deaths, the isolation of contagious disease and the sanitary supervision of the streets and homes. We were at that time only touching the fringe of what is now regarded as essential and justifiable expenditures to conserve the health of great cities. In this space of time has been covered a page of sanitary progress which, perhaps, will never be seen again. Nearly every year has witnessed the discovery of valuable protective measures against contagious diseases, so that at the present time nearly every infection has been investigated and its cause found, and very frequently adequate measures instituted for treatment and prevention. Like towering summits, however, stand out the great discoveries of Pas-

teur on rabies, of Diphtheria Antitoxin by Behring & Kitasato, of salvarsan by Ehrlich and the immense labors of Laveran, Ross, and Manson in tracing the origin of malaria. To these must be added the application of chlorination to purify water supplies and many other great triumphs of modern Bacteriology and Serology, which have rendered these forty years a golden page in the progress of man in saving humanity from unnecessary sickness and death. By the joint efforts of physicians, engineers, builders, chemists and bacteriologists there has occurred an almost complete disappearance of the formerly widely spread epidemics of Smallpox, Typhus and Relapsing fever, Typhoid, Dysentery, Diphtheria, Scarlet fever and Malaria.

This is by no means the end of the chapter, for with the knowledge of prevention which we now possess, there are few diseases whose prevalence cannot be minimized or reduced to a mark far below what it is today. It is clear, however, that in the wider horizon which is now visible, "hit or miss" methods will have to be abandoned and a better effort made to present a more united front by all social as well as health agencies, so that where we are weak in practical effort or legislative control, we may be made strong, so that at least the working hours of labor are made safe and our homes secured against avoidable misfortunes. To paraphrase, "city revenues are justifiably expended in health protection for the returns purchasable in the increased comfort for the family as well as a greater expectation of human life."

#### DISEASE RECORD FOR 1924

The year 1924 was singularly free from any visitation of contagious disease accompanied by high mortality, although there was a marked increase experienced in the milder epidemic infections with the result that the reported cases

for 1924 showed an increase of 2,702 over the previous year's record. This increase in disease prevalence was not reflected in the deaths recorded for the city which were less than for 1923

#### NON FATAL EPIDEMICS

The past year was characterized by a wide prevalence of epidemics of mild infections. The importance of non-fatal infections in populous areas has been somewhat neglected in the past or overlooked as only of slight concern to public health officials. As virulent and dangerous diseases, however, have been brought under control such as occurred with smallpox and vaccination, with diphtheria and antitoxin, with typhoid fever by the improvement in public water supplies, and with malaria eradication by draining swamps, the existence from time to time of non fatal diseases has been shown to exercise a considerable effect upon social and economic life. Toleration of these reached, however, its limit when the fact was accepted that all contagious and infectious diseases are preventable and their control desirable as a health measure

#### MILD INFECTIONS WIDESPREAD IN 1924

The three diseases, German measles mumps and chicken pox together were responsible for 6,044 cases of sickness without one single death attributed to these causes. The city wide distribution of these ailments would indicate a high infecting power of the various contagions and at the same time the presence in the population of an unusually large number of susceptible children

It is unwise, however, to rate the importance of an epidemic disease by its freedom from fatality. It is even more important to consider the economic loss to the community by the amount of sickness thus indicated. In school

attendance alone the interference with education reaches a high figure. If the average daily absence from school is taken as ten we have a total loss of 54,000 school days for this period. If we calculate in the same way the expenses of extra nursing care, the medical attendance and medicine, the total will indeed be impressive. There is also to be considered the mental anxiety and worry of the parents when sickness exists in the family.

#### FAMILIAR INFECTIONS DIFFICULT TO CONTROL

The difficulties in the control of infection in German measles, mumps and chicken pox are similar to the conditions existing in measles. In the same manner it is safe to assume that the infecting virus is present in the nose and throat of the individual in the early stages of the disease and before any characteristic symptoms such as rash or other definite signs manifest themselves to enable a diagnosis to be made.

The initial symptoms of German measles, mumps and chicken-pox are mild, the patient being able to move around and seldom being incommoded with more than transient fever or headache. When the time comes to establish quarantine and isolation it is safe to assume that nearly all susceptible playmates and relatives in the family have already been exposed to the infection. For this reason placarding, quarantine and isolation measures only partly aid in arresting the disease. Reliance must be placed upon the greater cooperation of parents with the Health Department during the existence of such epidemics, by proper supervision over children with colds or coryza who should be kept under observation at home. Diligent and vigilant school inspection will also detect many incipient cases of disease. It is a safe rule for school nurse and teacher to exclude all children with colds, running noses or eyes and

to obtain immediate medical diagnosis of suspicious rashes after exclusion of school pupils. There is too general a tolerance of colds among school children by school authorities, and the acceptance of parental statements that the child had a stomach rash. Such rashes are rare and during epidemic seasons should always be subject to a diagnosis by a physician.

#### MISTAKES IN DIAGNOSIS

The necessity of quarantine and isolation measures for German measles is emphasized by the possibility of such cases being scarlet fever, a quite common happening when the two diseases are prevalent at the same time. Smallpox is similarly diagnosed as chicken pox and indeed the majority of smallpox outbreaks arise in this way, especially among the colored. If exposure to smallpox can be ruled out a nearly certain evidence of chicken pox in children is, of course, a well marked vaccination take. Vaccination although protecting against smallpox will not act in a like manner against chicken pox which is a separate disease entirely.

When there is any doubt in diagnosis it is a pretty safe rule to invoke the aid of a department diagnostician.

#### MUMPS INFECTION MILD

It is the general experience with mumps that the infection has become a comparatively mild one. Many cases have very transient symptoms and during the early part of 1924 a large proportion of the cases in Newark were infected only on one side of the face. This, however, did not prevent the patient from transmitting the disease to other members of the family who at times had severe attacks on both sides. So mild were the symptoms that some reluctance was present among physicians to diagnose such



cases as true mumps. If it is remembered, however, that there is no other epidemic infection that attacks the parotid gland in this way but mumps, the true nature of the attack will be understood.

#### MEASLES AND INFLUENZA LESS PREVALENT

The cases of measles reported in the city for 1924 numbered 3,030, a decrease of 1,650 as compared with 1923. The deaths from measles were also low, 16 as compared with 41 in 1923, making an unusually low case fatality of 0.53 per cent. There was, however, an increase in the pneumonia prevalence as compared with the previous year of 172 cases. The year was conspicuous, however, by its freedom from influenza, only 338 cases being reported as compared with 1,462 for the year 1923. It is unlikely that the cases reported as influenza were of the true epidemic type.

We have now reached the low water mark for influenza in our cities where there is still a sufficiently large number of immunes living as a result of infection during the 1918 epidemic. It is not probable that influenza will again become world wide, failing the occurrence of some great calamity, such as international conflict or a great famine to foster its onset and spread.

Influenza has been observed to occur in quite definite cycles of years but such eras of freedom as well as susceptibility must depend upon a variety of complex conditions such as suitable centers where the disease can exist which enhance the spreading of the virus. There must also be a free and uninterrupted flow of travel such as that upon oceans and railroads. Experience has abundantly shown that there is no safeguard against the disease among susceptible populations. The so-called influenza common in winter is usually the result of a variety of bacterial infec-

tions resulting from contact and exposure and not to the presence of any one single infecting agent as in the case of Spanish influenza

#### DIFFICULT TO FORECAST EPIDEMICS

We have not arrived at sufficient knowledge of infectious diseases to be able to definitely foretell the onset of epidemics in our cities. We can, however, from time to time note a certain tendency to increase in certain years for the various diseases, always present more or less in crowded cities. This assumption is not always a sure guide

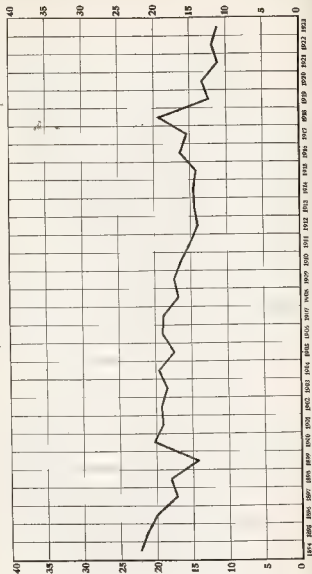
It is common knowledge that epidemic diseases will give signs of increasing spread from year to year with an apex or peak in one particular year. The reasons for this are complex, but in any city the major role is played by the presence of many young children, who as age advances become susceptible to a variety of epidemic diseases. Although the common epidemic infections are present in cities more or less all the year around some seasons and years seem appropriate or favorable for a wide distribution of infection

#### DEATH RATE FOR 1924

The mortality rate for any one year will vary according to the changes occurring in population or in the absence of epidemic diseases with a high death rate, or in whatever improvements take place in the housing and general well being of the people. The total number of deaths occurring in Newark for the year 1924 numbered 5,111 or 110 less than for 1923 making a crude death rate of 11.2 per 1000 upon an estimated population of 446,000. This rate is the same as that recorded for 1921 which itself was the lowest recorded in the history of the city, and is lower by half a point than the rate for 1923

# Newark's Annual Death Rates 1924 -- 11.2

(Rate per 1,000 Population)



The major reduction in the deaths for 1924 is grouped principally under the heads of influenza, measles, pneumonia and tuberculosis, although this reduction is somewhat discounted by a slight rise in the mortality during the year from scarlet fever, whooping cough and diphtheria. The following death, birth and infant mortality rates were recorded for the six years, 1919 to 1924:

Rate	1924	1923	1922	1921	1920	1919
Mortality Rates (Crude).....	11.2	11.7	12.2	11.2	13.4	12.5
Birth Rates.....	25.7	25.3	25.4	27.5	26.3	25.7
Infant Mortality Rates.....	65.2	68.0	74.8	71.5	84.7	76.2

#### DECREASED MORTALITY BY SPECIAL CAUSES

Deaths from the following causes were less during 1924 as compared with the previous year.

Cause of Death	1924	1923	Decreased Deaths
Influenza.....	19	72	53
Measles.....	16	41	25
Pneumonia (all forms).....	515	547	32
Epidemic Morbidity.....	10	15	5
Tuberculosis (all forms).....	392	406	14
Cancer.....	403	406	3
Accident.....	296	338	42
Diarrhoeal Diseases (under 5 years).....	132	133	1

The reduction in mortality for the year was principally seen in the low prevalence of epidemic respiratory diseases. The mortality from influenza was the greatest decrease under one cause, the 53 fewer deaths for 1924 bringing about a rate of 4.3 per 100,000 population as compared with 16.4 in the previous year.

#### INFLUENZA

Influenza of the epidemic type as experienced in 1918 has probably disappeared as a seasonal epidemic in America. The type experienced in 1924 was milder in symptomatology

and very infrequently accompanied or followed by the very fatal bronchial complications of Spanish influenza. The disease is, however, still apparently dangerous to the very young and very old, and presents a group of symptoms resembling in many ways the type of 1918.

Among the 19 deaths from this cause seven were under five years of age or 36.8 per cent. of all deaths from this cause, and a similar number between 25 and 64 years. More males died from this cause than females, 11 to 8. The proportion of influenza deaths to all the deaths for the year was 0.37 per cent. as compared with 2.42 per cent. for the five-year period 1919-1923.

It is common, however, to call a common cold influenza or gripe, and yet these conditions are not those brought about by the influenza bacillus, but by a variety of organisms, many of which are pus producing, and whose relationship to a cold is that of accidentally being present upon the mucous membranes of the nose and bronchial tubes when resistance is temporarily lowered by cold or exposure to mechanical irritation, such as dust.

#### MEASLES

Measles was only slightly prevalent in 1924 and the deaths for the year numbered 16, making a rate of 3.6 per 100,000 as compared with 41 deaths and a rate of 9.6 in 1923. The presence of measles among children at any time, however, is always reflected in an increased mortality from pneumonia of both types although the bronchial variety is more common as a complication of measles. During the year 1924, therefore, the freedom from the disease correspondingly reduced the deaths from pneumonia. The great susceptibility to fatal attack in little children is again shown in the deaths from measles during 1924, fifteen of the sixteen recorded, 93.7 per cent. were under five years

of age, and only one between 5 and 14 years. The proportion of measles deaths to the total for 1924 was 0.31 per cent. as compared with 0.79 for 1923.

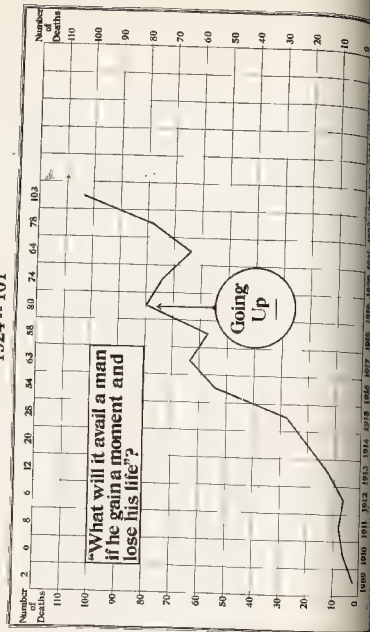
#### PNEUMONIA (BOTH TYPES)

The deaths from lobar and broncho pneumonia numbered 515 as compared with 547 for 1923, the reduction being represented by a rate of 115.4 per 100,000 in 1924 to 124.6 in 1923. This decreased pneumonia fatality was the result of the freedom during the year of widespread epidemics of influenza as well as of measles.

The fatality from this cause was higher among males than females, 307 to 208. The deaths from the bronchial type were more common under 5 years than with lobar pneumonia. 120 out of 195 deaths are registered for this age period or 61.5 per cent. of the total. Among the 32 deaths from lobar pneumonia 66 were under five years and 222 over 25 years, in the latter case nearly seventy per cent. of the total. In epidemic years the distribution between the two types of the disease is by no means as clear cut for youth and age, the pneumonia which follows respiratory epidemics is in the great majority of cases of the bronchial or croupous type for all ages attacked.

The disease is still too common as a cause of death during the winter months and very frequently is an end result of neglected coughs and colds. The proper place for the treatment of all colds is in the home, not only so that infection may be limited to the patient and his friends and family protected, but also that the patient may be protected from a cross infection whilst in a weakened physical state. Persons apparently in good health habitually carry the virus of pneumonia in the mouth and throat so that although symptoms of disease may be lacking infection to one's neighbor may be possible by the usual means of social contact.

# Number of Persons Killed in Automobile Accidents in Newark, N. J. 1924 -- 101



from a number of special causes. These are represented in the following table:

Cause of Death	1924	1923	Increased Deaths
Typhoid Fever	12	11	1
Scarlet Fever	8	5	3
Whooping Cough	34	19	15
Diphtheria	39	34	5
Apoplexy	357	330	21
Organic Heart Disease	729	727	2
Cirrhosis of Liver	41	30	11
Bright's Disease	400	340	60
Puerperal Abscess	86	52	34

#### TYPHOID FEVER RATE

Typhoid fever deaths have shown a tendency to increase since the lowest recorded rate of 2.0 per 100,000 in 1919. The mortality from this cause in 1924 numbered 12, making a typhoid fever rate of 2.7 per 100,000 population as compared with 2.5 per 100,000 in 1923.

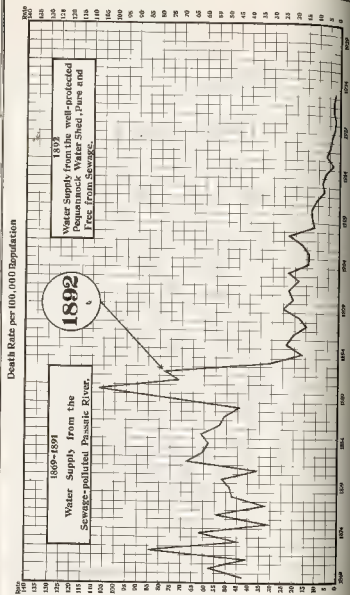
Although the seasonal Fall rise in typhoid prevalence was delayed until the end of November, the total reported cases for the year were 47 as compared with 60 for 1923.

The reason for the disparity between cases reported and deaths is presumably a result of infection contracted outside the city, a condition established in the majority of cases after investigation. The increase of typhoid fever prevalence in the Metropolitan district of New York City during the last three months of 1924 has resulted in many susceptible persons contracting the disease who work in that city and live in the suburban areas. The outbreak has not, however, been very widely extensive into nearby communities.

The city of Chicago has similarly been visited with increased typhoid fever cases, the cause for which has been



# Newark's Water Supply Greatly Reduces Typhoid Fever Menace 1924--2.7



ascribed to shellfish, principally oysters and clams. The reason for increased typhoid mortality in this district has not as yet been definitely explained.

#### SHELLFISH SUSPECTED

Nor can it be said that shellfish have been proved to be the real cause. Inspections of oysters and clam beds and laboratory reports on oysters have shown, however, that many of the beds and places used for floating oysters, situated in Metropolitan and estuarial tidal waters are grossly polluted with sewage. The result has been the banning of some sources of oyster supply situated near large cities as in the case of New York.

#### SEWAGE PURIFICATION NEEDED

There can be no doubt of the danger of shellfish pollution by tidal waters into which crude sewage is discharged and this must be an increasing danger in the waters near large cities.

The problem of avoiding the possibility of contaminating oysters and other shellfish is one dependent for its solution upon the adoption of the plan of purifying all sewage before discharge into coastal waters. This necessity was recognized many years ago abroad so that the sewage of such large cities as London and Glasgow is sedimented and partially purified before being discharged into adjacent rivers. The results have been vast improvements in the sanitary condition of the rivers Thames and Clyde and a corresponding improvement in the river banks and shore resorts. A process of preliminary sedimentation has been adopted for the sewage carried in the Passaic Valley Sewer on the Newark Meadows.

#### SCARLET FEVER AND WHOOPING COUGH MORTALITY

Twice as much scarlet fever was reported during 1924 as compared with 1923 and 8 deaths occurred, making a

well be co-ordinated with efforts to obtain the benefit of special surgical assistance in difficult cases where the economic condition of the family renders such aid impossible in ordinary circumstances, except where hospitalization is possible or desirable.

4. 10

#### INFANT MORTALITY RATE

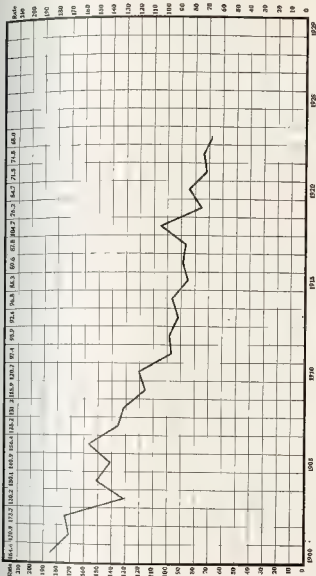
The deaths of infants under one year of age for the year 1924 numbered 746 and represents an infant mortality rate of 65.2 per thousand living births. This rate is not calculated upon an estimated number of births, but upon the actual number recorded for the year in the city. It is the lowest rate as yet recorded in the history of the city and compares well with that for 1923 of 68 per 1,000, and for the average rate for five years 1919-1923 of 75.4 per 1,000. This result is only achieved by a persistent campaign for the education of mothers in the care of infants as carried on by the Division of Child Hygiene, with the object of popularizing and insisting upon maternal nursing during the first year of infant life. There can be no doubt also of the value of the prenatal clinic in conserving the life of both mother and child. The absence during the year 1924 of epidemic infections which affect infant life was also of material aid in lowering the infant mortality rate.

#### THE BIRTH RATE

The births recorded in this city during 1924 numbered 11,449, representing a birth rate of 25.7 per thousand population. As compared with the previous year the rate is somewhat higher, five-tenths of a point. The birth rate for 1924 is an average rate for the city which has fluctuated from a low level of 24.8 per 1,000 in 1900 to a record high of 30.9 per 1,000 in 1911. The births in cities have shown a tendency to decline in recent years in the majority of states in this country and indeed abroad as well.

# Newark's Infant Mortality Rates 1924--65.2

Deaths under one year of age per 1,000 living Births



Division of Vital Statistics, Dept. of Health, Newark, N.J.

It is fast becoming an accepted belief that a low birth rate is one of the phenomena of a high civilization and the opposite that of backward communities. As long as a falling birth rate goes hand in hand with a saving of life by reducing infant and other preventable deaths, little need be feared for the future of the country. At the present time the ratio of births to deaths is in favor of births by two to one a sufficient margin for deprecating the race suicide bogey. Fewer and better babies is a good slogan to offset the results of fewer births.

#### MORTALITY AMONG COLORED POPULATION

It is estimated that the colored population of Newark is 22,000. Among these there were recorded 563 deaths during 1924, making a death rate for this class of 25.6 per 1,000, or 14.4 above the general rate for the rest of the city. The most frequent cause of death was pneumonia with 98 fatalities. The deaths from all forms of tuberculosis among this group, numbered 76 amounting to a death rate of 345.5 per 100,000 of the estimated colored population. This rate has been reduced by 68.0 points as compared with the prevailing rate in 1923. It is still, however, considerably higher than the average rate for the city, 87.9 per 100,000. The emigration of colored labor to the North will considerably influence our mortality rates in the future in these special diseases to which the colored individual is peculiarly susceptible, principally pneumonia and tuberculosis. This will happen until a balance of physical resistance is developed to the rigors of our northern climate. Better results in this way would be obtained if the new labor movement were directed to favor the early summer months for persons wishing to travel north.

The deaths of colored infants under one year numbered 108 making an infant mortality rate of 129.5 per thousand

births as compared with the rate of 65.2 for the rest of the city

## NEWARK GENERAL AND COLORED RATE COMPARED

	General	Colored
General mortality per 1,000	11.2	25.6
Infant mortality per 1,000 births	65.2	129.5
Infant mortality per 1,000 live births	87.9	345.5

## EPIDEMIC DISEASES IN 1924

Many mild epidemic infections were prevalent during 1924, becoming more or less widespread throughout the city, bringing about a considerable increase in the number of reportable diseases. For 1924 the number so reported was 19,526 as compared with 16,824 for 1923. This increase is nearly all accounted for under the heads of scarlet fever, whooping cough, German measles and mumps. The following are the increases in prevalence as compared with 1923

Reported Cases	1924	1923
Scarlet Fever	1,011	560
Whooping Cough	2,561	1,124
German Measles	2,225	222
Mumps	2,262	661

## SCARLET FEVER REPORTS

Scarlet fever of a mild form was prevalent in the early months of the year and reached its height in the first week in May. Few cases were existing in the summer time but a recurrence took place in the latter end of 1924 with the highest mark for the year in the second week of December. The disease was, however, of so slight a nature that in many cases either a doctor was not called or there was failure to recognize the character of the disease. Although the usual symptoms of the infection were slight and the case mortality for the year low, less than one per cent.,

severe and fatal cases occurred among delicate and enfeebled children. The opinion of some, that the malady was akin to what was known as the Fourth Disease, as described by Dukes, was not substantiated by investigation, as in the majority of cases desquamation could be demonstrated although perhaps not so evident or so profuse as in atypical attacks of the disease. The diagnosis of scarlet fever was further complicated by the existence of German measles in the early months of the year. No doubt, many cases of each disease were mistaken for the other. Susceptibility is not marked under five years, although 250 out of 1,011 reported cases were at this age period. The ages between five and fourteen years were more generally affected, there being 615 cases or 60 per cent. of all so reported.

#### DICK TEST FOR SCARLET FEVER SUSCEPTIBILITY

The similarity between the Dick test for scarlet fever susceptibility and the Schick test for diphtheria is striking for the reason that the reactions in both cases depend upon the effect of a bacterial toxin upon susceptible individuals, as shown by a skin test. Similarly by adopting a process of gradual immunization, it is claimed by Dr Zingher of New York that susceptibility to scarlet fever can be overcome. Some difficulties in the standardization of the immunizing doses of the Dick vaccine have arisen as a result of the non susceptibility of the usual laboratory amounts to the specific virus of the disease. This with the difficulty in obtaining sufficient material for any extensive effort to test out the procedure has interfered considerably with its more general adoption. That the test is specific has been clearly shown by the positive reactions obtained in the early stages of scarlet fever, 91.3 per cent. in 232 cases observed by Zingher, all the cases becoming negative during convalescence from the disease.

We have in diphtheria and scarlet fever a localized infection in the tonsil and naso pharynx of the specialized bacteria with the production of a powerful toxin subsequently absorbed into the circulation with resulting damage to nerve centers and specialized tissues such as that of the heart muscle and the epithelium of the kidneys. The importance of all such new discoveries lies in the possibility of their use for prevention. Although opening a promising field, the Dick test is not as yet capable of general application,

not only because of the scarcity of laboratory material for its application but also because of the supposed extremely short duration of the immunity developed. No doubt, some way of combining the Schick and Dick tests will be worked out in due time so as to avoid a duplication in the operation as well as in preventive and educative efforts among parents and school authorities.

#### WHOPPING COUGH

The year 1924 was apparently favorable for the prevalence of whooping cough, 2,561 cases of the disease being reported as compared with 1,124 for the previous year. Contrary to the usual epidemic disease whooping cough is commonest during the summer months, finding in the warm months suitable conditions for its spread. The prevalence was low in the winter months and rose gradually to a peak in the last week of August with 117 recorded cases. More than half the total cases were in children under five years, although higher age periods were well represented in the total.

The results obtained in treating whooping cough by chlorine gas have been indeterminate; some cases recorded improvement and others seemed unaffected or unimproved after a series of treatments. More promising results, however, have been obtained with this disease than in most of the other infections for which relief by chlorine was sought.



## GERMAN MEASLES AND MUMPS

German measles was widespread in the city during the early summer months, 2,229 cases being reported as contrasted with 212 for 1923. The infection was common at nearly all age periods although the greater number of children attacked were under ten years of age, comparing very generally to the age incidence of scarlet fever, for which reason the diagnosis in German measles should exclude as far as possible all chance of the case being one of mild scarlet fever.

The reported cases of mumps for the year numbered 2,202 as contrasted with 661 for the previous year. The great majority of the cases was recorded in the first four months of the year, the peak or highest prevalence being in the second week of April. Twice as many cases (1,069) were recorded at 5-9 years, than under 5 years, 516 cases. At ages 10-19 years, 467 individuals were affected.

## DECREASED PREVALENCE OF DISEASE

The reportable diseases in which lessened prevalence was recorded for 1924 as compared with 1923 were as follows:

Reported Cases	1924	1923
Diphtheria	575	634
Tuberculosis	17	1,28
Infantile Paralysis	12	48
Measles	331	468
Influenza	158	1,462

## DIPHTHERIA PREVALENCE

The number of cases of diphtheria reported in 1924 in the city numbered 575 as compared with 634 in 1923. This lessened prevalence, however, was not accompanied by a corresponding decreased mortality. Diphtheria is a common complication of scarlet fever inasmuch as the inflamma-

tion in the throat weakens the resistance to bacterial invasion. The widespread nature of scarlet fever throughout the city during the early and late months of 1924 we have reason to believe was the inciting cause of fatal diphtheretic complications. The age periods of susceptibility were confined principally to children under 10 years, 80 per cent. Forty one per cent were under five years of age and 39 per cent. between five and nine years.

#### PREVENTION OF DIPHThERIA

A most striking incident in proof of the life saving qualities of early diagnosis and administration of diphtheria antitoxin is afforded by the record of the U. S. Registration district for ten years, 1913-1922. During this period the reduction in mortality from diphtheria for the cities was 28 per cent. as compared with only 5 per cent. for the rural districts. The availability of the antitoxin in the city, and its almost universal free distribution to the physicians has encouraged its use in doubtful and early cases of the disease. In the rural districts, laboratory facilities are poor or slow in diagnosis of swabs, moreover, antitoxin is not stocked by the small druggist, with a consequent delay in administration to the positive case and not at all for the suspicious or early cases of infection.

#### SCHICK TEST

The Schick testing campaign was carried out during the year among the children of the Parochial schools as a result of which 1,274 children were tested among whom 580 were found to be positive and immunized by subsequent toxin-antitoxin injections. There are now among this group as the result of Schick testing, 3,109 children immune to diphtheria, constituting a quarter of the total enrollment of the schools. In the public schools of Newark, Schick testing and immunization is being popularized and

carried out under the Board of Education, with encouraging results. We may look forward to the time when an immune population of school children will have its full influence in eliminating diphtheria as a menace to child health.

#### INFANTILE PARALYSIS AND ENCEPHALITIS LETHARGICA

The number of cases of infantile paralysis reported from year to year has steadily decreased since the great pandemic of 1916. During 1924, 12 cases of the disease were reported as compared with 48 for 1923. No deaths were recorded from this cause during the year. The age periods of attack showed that four cases were reported under five years, and six cases between five and nine years. In recent epidemic years the disease has occurred most frequently in the dry months of summer. In 1924, five cases out of the twelve were reported in the first six months of the year.

Encephalitis lethargica was less prevalent during the year, 35 cases being reported, or five less than in 1923. The seasonal distribution would indicate an early summer and late fall preference, there being ten reported cases in May and seven in November. There were 13 deaths from this cause during the same period, five being under five years, and eight occurring between the ages 25 to 64 years. Encephalitis in contrast with infantile paralysis shows a disposition to attack adults more readily than children. The case mortality for each age period is, however, uncertain as there must be a large number of mild cases not diagnosed or only so after death the symptoms being obscure and differential diagnosis difficult. The milder cases are missed or treated under the name of a variety of other maladies.

## CLASSIFICATION OF BIRTHS IN 1924

		Rate per 1,000 Population
Males	5,873	13.2
Females	5,576	12.5
Totals	11,449	25.7
White	10,610	23.8
Colored	834	1.9
Yellow	4	—
Red	1	—
Legitimate	105	2.4
Subsistings	502	1.1

## YEARLY BIRTH RATE PER 1,000 POPULATION, 1900-1924

	1924	25.7
1923	25.3	1915 29.1
1922	25.4	1914 29.7
1921	27.5	1913 29.2
1920	28.3	1912 29.0
1919	28.7	1911 28.4
1918	27.1	1910 27.9
		1909 26.9
		1908 25.2
		1907 24.0
		1906 24.8

## BIRTH RATE BY WARDS FOR 1924

(Rate per 1,000 Ward Estimated Population Based Upon

U. S. Census of 1920)

Ward	Estimated Population	Total Births Reported	Rate per 1,000 Ward Population
1	22,330	1,636	32.0
2	18,306	268	14.6
3	8,827	811	21.3
4	13,392	177	13.1
5	22,449	590	26.3
6	21,878	398	18.2
7	18,368	452	24.6
8	35,435	742	22.2
9	37,333	902	24.2
10	24,481	790	32.3
11	22,571	394	17.5
12	27,350	685	25.0
13	4,313	936	22.7
14	38,855	984	25.3
15	17,225	364	21.1
16	38,649	778	20.1

CRUDE DEATH RATES FOR NEWARK, ACCORDING TO  
CENSUS AND INTERCENSAL ESTIMATED INCREASES

(Rate per 1,000 Population)

Year	Population	No. of Deaths	Death Rate
1894	203,923	4,543	22.28
1895	215,725	4,615	21.37
1896	225,000	4,716	20.96
1897	230,000	4,010	17.43
1898	235,000	4,303	18.30
1899	240,000	3,537	18.90
1900	240,070	5,006	20.34
1901	250,000	4,806	19.22
1902	255,000	4,943	19.38
1903	266,000	4,723	18.50
1904	272,000	5,378	19.77
1905	283,239	5,025	17.74
1906	290,000	5,351	18.44
1907	300,000	5,724	19.08
1908	315,000	5,207	17.07
1909	311,000	5,529	17.77
1910	347,460	5,764	16.64
1911	352,000	5,337	15.16
1912	370,000	5,423	14.65
1913	380,000	5,562	14.63
1914	395,000	5,809	14.70
1915	375,000	5,382	14.30
1916	385,000	6,357	16.50
1917	405,000	6,205	15.30
1918	430,000	8,483	19.72
1919	440,000	5,534	12.57
1920	414,216	5,551	13.40
1921	425,000	4,774	11.24
1922	432,000	5,206	12.06
1923	439,000	5,221	11.67
1924	446,000	5,704	12.22

## MORTALITY FROM ALL CAUSES OF DEATH

(Rate per 1,000 Ward Estimated Population Based Upon  
U. S. Census of 1920.)

Ward	Estimated Population	Total Deaths Total.	Rate per 1,000 Ward Population
1	32,330	295	9.1
2	16,306	186	10.2
3	38,027	415	10.9
4	13,362	188	14.1
5	22,449	280	12.5
6	21,878	223	10.2
7	18,308	232	12.6
8	35,437	426	12.7
9	37,333	380	10.2
10	24,481	246	10.0
11	22,571	235	10.4
12	27,306	264	9.7
13	4,313	400	9.7
14	38,800	358	9.2
15	17,225	205	11.9
16	38,640	346	9.0

DEATHS FROM SCARLET FEVER, TYPHOID FEVER AND  
DIPHTHERIA PER 100,000 POPULATION, 1894-1924

Year	Scarlet Fever	Typhoid Fever	Diph- theria
1894	33.8	16.7	...
1895	16.2	23.2	126.6
1896	7.6	20.9	96.9
1897	23.5	14.3	59.6
1898	6.4	17.4	56.6
1899	14.2	25.0	51.7
1900	22.4	20.3	58.1
1901	9.2	22.8	41.2
1902	18.0	18.4	41.2
1903	26.7	23.7	45.1
1904	44.1	14.7	55.1
1905	15.9	14.1	38.8

Year	Scarlet Fever	Typhoid Fever	Diph- theria
1906	117	172	341
1907	137	230	317
1908	292	115	216
1909	225	125	338
1910	112	127	299
1911	60	105	210
1912	30	70	246
1913	60	79	280
1914	68	66	164
1915	16	29	131
1916	18	60	148
1917	67	42	123
1918	26	35	191
1919	27	20	113
1920	20	19	149
1921	33	28	104
1922	35	28	169
1923	11	25	77
1924	18	27	87

## MORTALITY UNDER SPECIAL MEASURES, 1918-1924

Cause	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924
Tuberculosis	2,113	5,711	8,309	5,551	5,844	8,481						
Phthisis	17	11	12	8	9	15						
Consumption	1											
Meningitis												
Measles	16	41	45	30		191						
Scarlet Fever	5	5	15	12		11						
Whooping Cough	12	19	18	12		11						
Diphtheria	36	34	73	50		82						
Scarlet	19	19	87	20		182						
Enteric	1	15	16	16		45						
Enteric	1			1		1						
Enteric	346	357	14	420		683						
Enteric	21	7	31	34		41						
Enteric	98	1	20	11		56						
Enteric	403	406	80	368		531						
Enteric	31	4	71	36		91						
Enteric	336	346	146	367		359						
Enteric	720	711	640	692		714						
Enteric	70	71	8	68		68						
Enteric	320	338	27	325		325						
Enteric	96	2,01	252	403		403						
Enteric	70	68	62	83		92						
Enteric	55	41	65	35		51						
Enteric	32	33	187	240		244						
Enteric	76	90	81	65		64						
Enteric	56	44	45	46		64						
Enteric	41	30	34	32		42						
Enteric	369	340	346	506		506						
Enteric	25	2	6	4		6						
Enteric	23	19	8	22		4						
Enteric	65	33	40	35		42						
Enteric	386	376	562	407		445						
Enteric	26	42	40	34		34						
Enteric	280	438	757	348		389						
Enteric	20	32	30	26		26						
Enteric	72	56	68	41		56						
Enteric	3	3	2	2		2						
Enteric	720	0	8,6	664		640						
Enteric	11,2	11,7	12,1	13,4		10,7						

Years Death per 1,000







PERCENTAGE DISTRIBUTION BY AGE PERIODS FROM PRINCIPAL CAUSES  
OF DEATH IN NEWARK, N. J., 1924

CAUSES	TOTAL DEATHS		UNDER 5 YEARS		5 TO 24 YEARS		25 TO 44 YEARS		45 TO 64 YEARS		65 YEARS AND OVER		Percent of Total Deaths, Causes, 1923
	Deaths	Per Cent.	Deaths	Per Cent.	Deaths	Per Cent.	Deaths	Per Cent.	Deaths	Per Cent.	Deaths	Per Cent.	
Malaria	16	1.8	1	31.2	1	6.3	1	1.3	1	1.3	1	1.3	0.31
Whooping Cough	34	100.0	33	97.1	1	2.9	1	2.9	1	2.9	1	2.9	0.67
Dysentery	39	30.0	30	76.9	9	23.1	1	2.5	1	2.5	1	2.5	0.75
Infuenza	59	100.0	7	36.8	5	15.8	5	21.1	8	15.8	2	10.5	0.37
Scarlet fever	5.5	100.0	1.8	36.1	4.2	8.2	99	19.2	117	42.7	71	13.8	10.08
Diphtheria	79	90.7	15	64.3	1	1.4	1	1.4	5	2.2	17	2.7	1.37
Tuberculosis of Lungs	346	100.0	3	0.8	85	24.6	65	47.7	31	23.4	12	3.5	6.77
Diarrhoeal Diseases	132	100.0	132	100.0									2.58
Stomach and Intestinal Diseases (not under 5 years)	356	100.0	356	100.0									6.97
Malformations	399	100.0	6	1.5	15	3.8	62	15.5	165	41.4	151	37.8	7.80
Erysipelas	357	100.0					20	5.6	110	30.2	197	55.2	6.98
Apoplexy	729	100.0	9	1.2	61	8.4	14.5	1.9	279	38.8	267	36.6	14.26
Chorea	403	100.0	5	1.2	5	1.2	7	1.7	212	52.6	115	28.6	7.88
Accidents	296	100.0	30	0.1	73	2.5	84	28.4	71	4.0	51	12.5	5.79



# ANNUAL MORBIDITY AND MORTALITY RATES FOR 1924 IN CITIES OVER 100,000 POPULATION

The following table gives the general death rate, together with the morbidity and mortality rates from eleven communicable diseases in fifty-six cities of the United States having over 100,000 population

CITIES	Total Popu- lation	Death rate per 1,000 Popu- lation	City's Popu- lation July 1st 1924	RATE PER 100,000 POPULATION									
				Typhoid Fever		Measles		Scarlet Fever		Whooping Cough		Tubercu- losis of lungs	
				Mor- tality	Mor- bidity	Mor- bidity	Mor- tality	Mor- tality	Mor- bidity	Mor- tality	Mor- bidity	Mor- tality	Mor- bidity
Albany, N. Y.	14.2		122,000	129.5	1.6	31.7	408.5	6	364.3	3.1	165.9	90.7	64.5
Albany, N. Y.	8.2		27,400	29.0	18.5	7.4	10.1	2.6	43.4	22.0	N. S.	N. S.	184.6
Baltimore, Md.	13.4		786,338	5.5	5.8	5.8	2.8	2.8	23.6	6.0	1.84	107.7	186.2
Birmingham, Ala.	17.0		200,285	82	7.5	610.0	12.5	90.6	10.2	1.5	251.6	101.6	37.5
Boston, Mass.	8.1		71,728	3.0	1.0	0.7	5.3	503.4	6.0	84.3	2.7	240.7	37.5
Bridgport, Conn.	9.4		162,705	1.7	4.1	24.0	2.0	2.0	84.3	3.7	240.7	86.3	389.9
Buffalo, N. Y.	12.2		553,336	13.0	4.7	87.7	0.7	13.8	1.1	4.9	44.3	49.8	58.4
Cambbridge, Mass.	12.8		111,944	13.0	4.5	682.5	2.7	1.6	2.6	1.9	48.7	83.1	170.6
Chicago, Ill.	15.1		2,939,605	2.4	1.5	201.1	2.4	1.6	1.7	1.8	1.64	105.4	700.1
Cincinnati, Ohio	15.1		40,865	15.6	2.2	538.9	5.9	13.3	7.6	127.5	7.6	70.7	390.7
Cleveland, Ohio	10.2		9,2302	10.1	1.2	251.6	2.0	3.3	1.7	1.8	201.1	10.8	228.3
Columbus, Ohio	13.2		266,709	7.9	3.7	38.6	0.7	190.5	1.5	4.9	3.6	23.2	24.8
Dallas, Tex.	10.8		170,000	11.2	7.4	30.6	0.6	148.8	3.8	4.8	5.5	68.2	81.4
Detroit, Mich.	11.2		1,150,000	11.0	2.6	323.8	4.8	300.5	4.4	179.2	5.0	197.0	21.1
Denver, Colo.	14.5		285,000	18.5	4.9	6.8	8	17.2	8	17.2	1.0	184.2	64.7
El Paso, Tex.	2.0		115,614	25.9	2.6	504.8	2.6	52.4	2.6	283.6	2.0	81.0	20.9
Fort River, Mass.	6		190,886	4.9	11.6	11.6	1.2	197.9	1.5	250.6	26.8	387.7	98.9
Fort Worth, Tex.	8		157,394	9.2	1.5	829.1	0.7	315.0	9.3	69.1	163.5	7.8	173.5
Grand Rapids, Mich.	12.2		136,487	11.5	2.8	379.5	4.7	6.6	3.9	4.4	N. S.	28.4	68.4
Houston, Tex.	10.3		148,322	20.2	3.4	123.0	3.8	13.5	3.7	11.2	4.4	12.6	78.1
Indianapolis, Ind.	12.6		285,000	24.8	4.0	546.5	3.8	3.9	1	0.5	89.7	8.1	159.1
Jacksonville, Fla.	13.1		390,424	4.4	11.7	11.7	0.8	78.7	1	101.1	3.4	80.8	118.1
Jacksonville, Fla.	13.1		390,424	4.4	11.7	11.7	0.8	78.7	1	101.1	3.4	80.8	118.1
Jacksonville, N. C.	12.8		313,866	15.5	2.8	313.0	4.6	131.3	2.2	34.7	16.6	24.6	140.2

[illegible]



State or Territory	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930
Alabama	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Alaska	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Arizona	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Arkansas	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
California	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Colorado	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Connecticut	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Delaware	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
District of Columbia	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Florida	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Georgia	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Idaho	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Illinois	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Indiana	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Iowa	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Kansas	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Kentucky	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Louisiana	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Maine	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Maryland	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Massachusetts	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Michigan	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Minnesota	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Mississippi	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Missouri	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Montana	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Nebraska	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Nevada	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
New Hampshire	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
New Jersey	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
New Mexico	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
New York	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
North Carolina	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
North Dakota	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Ohio	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Oklahoma	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Oregon	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Pennsylvania	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Rhode Island	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
South Carolina	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
South Dakota	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Tennessee	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Texas	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Vermont	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Virginia	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Washington	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
West Virginia	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Wisconsin	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2
Wyoming	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2	11.2

Pneumonia and influenza deaths per 100,000

\* Denotes insufficient reporting of cases, as the morbidity is lower than the mortality rate. Had a check been made of the data, and reported cases of the same cause that would not have occurred.

\* Denotes pneumonia all forms as figures were not obtained separately.

N. R. Denotes not a reportable disease.

N. S. Denotes no separation of different forms of diseases.



## INOPHALITIS LETHARGICA DEATHS FOR 1924

Month	Males	Females	Under 1 Year	1 to 2	2 to 5	Total Under 5 years	5 to 14	15 to 24	25 to 44	45 to 64	65 and over	Total
January												
February												
March	1	2				1				1		2
April		1										1
May	1	3			2	2				2		4
June												
July	1	1						1	1			2
August	1											1
September												
October		1						1				1
November		1								1		1
December		1				1						1
TOTAL	4	9	1	1	3	5		1	1	5		13

ANNUAL DEATH RATES FOR 1924 IN CITIES OVER  
100,000 POPULATION

Information by the U. S. Bureau of the Census, based upon  
estimated population on July 1st, 1924)

CITIES	Rate per 1,000	
	Population	Population
Port World, Tex.	106,482	8.7
Minneapolis, Minn.	485,000	9.6
Yonkers, N. Y.	109,236	10.0
New Bedford, Mass.	132,602	10.1
Cleveland, Ohio	912,502	10.2
Grants Rapids, Mich.	148,322	10.3
Norfolk, Va.	164,105	10.4
Tacoma, Wash.	129,525	10.7
Dayton, Ohio	170,000	10.8
Lowell, Mass.	104,500	10.9
NEWARK, N. J.	445,000	11.1
Oakland, Calif.	246,893	11.2
Montreal, Minn.	417,280	11.2
Chicago, Ill.	2,939,605	11.2
Springfield, Mass.	155,549	11.4
Portland, Oregon	278,717	11.5
Washington, Del.	119,888	11.6
St. Paul, Minn.	241,891	11.7
St. Louis, Mo.	274,959	11.7
New York, N. Y.	6,137,527	11.8
Syracuse, N. Y.	188,060	11.9
Peoria, Ill.	140,637	12.0
New Haven, Conn.	175,947	12.1
Worcester, Mass.	196,200	12.4
Omaha, Neb.	208,000	12.6
Buffalo, N. Y.	553,336	12.7
Albany, N. Y.	111,944	12.8
San Antonio, Tex.	130,100	13.0
Portsmouth, N. H.	1,951,076	13.0
Indianapolis, Ind.	358,424	13.1
Fall River, Mass.	130,886	13.1
Columbus, Ohio	266,794	13.2
Lowell, Mass.	112,754	13.4
Washington, D. C.	466,736	13.4

Cities	Population	Rate per 1,000
		Population
St. Louis, Mo.	812,698	13.5
San Francisco, Calif.	600,000	13.0
Boston, Mass.	776,783	12.1
Providence, R. I.	244,000	12.2
Baltimore, Md.	784,938	14.3
Trenton, N. J.	128,277	15.2
Pittsburgh, Pa.	626,115	15.2
Cincinnati, Ohio	407,835	15.2
Albany, N. Y.	128,000	15.4
Birmingham, Ala.	200,785	16.7
Jacksonville, Fla.	102,471	17.5
Atlanta, Ga.	227,500	18.1

Newark's death rate for 1924 is the eleventh lowest out of forty-six cities. This rate equals the lowest on record for Newark.

ORGANIC HEART DISEASE—ITS DISTRIBUTION  
AND MENACE

Charles V. Craster, M.D., Health Officer, Newark, N. J.

In the international classification of causes of death there is a clear distinction made between the deaths from the acute forms of heart disease, such as pericarditis and acute endocarditis and those from the more chronic type which are classed as organic diseases of the heart.

This latter, therefore, represents a group of heart lesions of which probably the greater number are valvular lesions but also includes the degenerative diseases of the myocardium. In any discussion, however, of the causative factors of heart diseases as a group it is necessary to take into account the acute as well as the chronic forms. This would not only include the degenerative disease of later life classed under angina pectoris and arteriosclerosis.

## ORGANIC HEART DISEASE MORTALITY HIGH

Contrary to a certain amount of accepted belief death from acute heart disease is not common. The census mortality figures for the United States registration area for 1920 show a rate of 8.8 per 100,000 population from pericarditis and acute endocarditis, both acute heart conditions. In the same year the death rate from organic heart disease was 141.9 per 100,000. Here is a rate over 16 times as high for the mortality from the more chronic forms of heart disease. In the acute group, however, there is a very much more recent relationship to the presence of certain epidemic diseases the fatal results in these cases being more generally associated with some septic pyogenic process. On the other hand the fatal results of a chronic cardiac disease are brought about more by failure of the heart to function in a mechanical way. Although the original damage to the

heart tissue, either muscular or nervous, was originally pathological, the failure to function is a physical defect which renders the heart a machine incapable of effective work.

From the time of Harvey," says Clifford Allbutt, "although physiologists have not asserted that mechanical conceptions can cover the whole phenomena of the circulation, they have learned to see nevertheless that these conceptions cover so much of the ground that in mastering them they and their children may find reward enough." The mortality classification, therefore, into acute and chronic heart diseases recognizes a very commonly observed fact that death from chronic heart disease is not except in a few instances, due to an acute disease but rather a gradual failure of function due to the defective apparatus of a damaged heart.

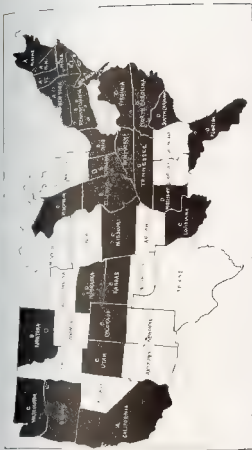
#### AGE DISTRIBUTION

The mortality from organic heart disease is essentially one of middle and advanced life; only a small proportion of the total deaths are recorded in the early years of life.

At the age period forty to forty nine the mortality from organic heart disease in the United States registration area during 1920 was only exceeded by that due to tuberculosis and cancer. In the age period fifty to fifty nine the deaths from heart disease were only exceeded by those from cancer. In all the age periods above sixty, heart disease was by far the commonest cause of death in the registration area. No more striking figures could be shown to illustrate the inability of the average individual to reach the threescore years and ten of the biblical records. Although heart disease has been for many years a convenient term used to certify a cause of death, there is little reason to suppose that in the majority of cases the mortality from this cause is not accurately described. It is natural to assume that

# Age Mortality from Organic Heart Disease, U. S. Census 1920

Ages	10 yrs. years	20 yrs. years	30 yrs. years	40 yrs. years	50 yrs. years	60 yrs. years	70 yrs. years	80 yrs. years	90 yrs. years
124,123	2,015	2,874	3,589	5,906	9,664	16,285	29,025	33,978	18,229
									2,337



Mortality from Organic Diseases of the Heart by States per 100,000  
Tabulation by the U. S. Bureau of Census for Year 1920



the wear and tear of active life will react more severely upon certain organs of the body than upon others.

#### GREAT RESERVE POWER OF THE HEART

The physiology of the heart shows that this organ possesses a vast store of reserve power which has to be used up before structure damaged to a great extent before function becomes impossible. According to Williamson the heart performs work each day equal to that done in raising 17,500 kilograms through a distance of one meter." In a lifetime of sixty years this amounts to the enormous total of 31,129,000 kilogram meters of work. Damage to such a structure must be very severe if it fails to function as intended by nature. It is natural to assume, however, that at the later age periods a heart damaged by valvular disease or degenerative myocarditis has perhaps reached the limit of its accommodation to the burden of life and only in rare instances can it be bolstered up by care and relief from strain to enable life to be prolonged.

According to Hare "an old valvular damage, however, soon becomes a serious matter when certain influences or states begin to strain the heart and hence in no class of cases is it so important to take account of the general situation from the special in local conditions as in chronic cases of this viscus." Thus judged by post mortem appearances alone it may be difficult to decide whether valvular changes were the chronic results of acute processes or were caused by acute processes supervening upon chronic lesions.

#### THE EXTENT OF THE PROBLEM

The deaths from organic heart disease for the registration area of the United States during 1920 numbered 124,143 making a rate of 141.9 per 100,000 based on an esti



mitted population of 87,486,713, or 82.3 per cent. of the population of the United States. Ten years previously, in 1911, the deaths from this cause were 83 525 and the rate per 100,000 was 140.9. So remarkable has been the increased mortality from heart disease for the whole country that the Director of the Census notes in the 1920 report, "More deaths are reported as due to organic heart disease in each of the six years from 1915 to 1920 than to all forms of tuberculosis which previously held first place among causes of death."

For many years tuberculosis has headed our mortality records as the premier cause of death. In 1911 the tuberculosis rate per 100,000 population was 159.2 and that from organic heart disease 140.9. Ten years later these positions are reversed, the tuberculosis rate in 1920 being 114.2 whilst that from organic heart disease had increased to 141.9 per 100,000.

#### Mortality Rates From Heart Diseases and Tuberculosis, 1915-1920

	1915	1916	1917	1918	1919	1920
Organic heart disease	147.6	150.6	153.8	153.3	131.0	141.9
Tuberculosis	146.3	142.1	147.1	150.0	125.6	114.2

#### SECTIONAL HEART DISEASE MORTALITY

No less important are the mortality returns from the various states, which in many cases show remarkable increases in the deaths from organic heart disease. In the ten year period 1911 to 1920 instances of the highest increases were as follows per 100,000 population:

	1911	1920
Washington	86	113.8
Minnesota	89.4	113.7
New York	167.5	191.0
Utah	83.3	106.8
Maryland	142.1	168.1

In 1920 the highest fatality from organic heart disease was found in Vermont, 228.5 per 100,000; New Hampshire, 204.7; and Massachusetts, 195.2.

The lowest rate from this cause of death was recorded in Montana, 76.7; Mississippi, 85.3; Tennessee, 86; Kentucky, 87.6; Nebraska 92.7.

In the 66 registration cities of 100,000 population and over the greatest increase in mortality from this cause during the ten-year period 1911 to 1920 was:

	1911	1920
Syracuse	168.2	215.8
Boston	192.8	233.7
Memphis	95.1	130.2
Grand Rapids	123.0	155.6

The highest rates in the Census Bureau figures for 1920 for the registration cities were:

Boston	233.7 per 100,000 population
Albany	228.2 " " "
Worcester	227.6 " " "
Syracuse	215.8 " " "
San Francisco	212.2 " " "

The unusually high mortality from heart disease in the three New England states, Vermont, Massachusetts and New Hampshire, is remarkable. A similar predisposition to this cause of death is seen in the two northern cities of Boston and Syracuse. The lowest rates were those of southern or middle western states.

#### THE PREVALENCE OF HEART DISEASE

To what extent heart disease is present in a population can only be very indefinitely estimated. In a report of the New York Association for the Prevention and Relief of Heart Disease, Emerson gives the results of an investigation

of the attendance at ten large general hospitals in New York City and 43 special cardiac clinics. In this report it was found that 4.58 per cent of patients admitted to these hospitals in one year were cardiac cases. It is Emerson's belief that 2 per cent of the people of all ages and sexes are suffering from heart disease. This would mean an army of 2,000,000 persons in the United States having some form of heart disease in its various stages of disability. Among 2,510,706 men examined in the draft during the World War 88,000 were found suffering from valvular disease of the heart. About 5.5 per cent of all the men had noteworthy defects of the valves of blood vessels. This is about 10 per cent of all defects found. Examination of 139,770 children over six years old in New York schools in 1921 showed that the incidence of heart disease for all cases examined was 1.4 per cent, or a total of 5,730 at this age period.

The incidence found to exist among school children is significant of the damaged hearts existing at early ages and which in the later age periods is responsible for the incapacity and mortality of the wage earners. About 2 per cent of all persons examined by insurance companies are rejected each year on account of cardiac defect. A similar percentage of incidence was found to exist among the garment workers of New York by J. W. Schereschewsky.

#### THE CAUSE OF HEART DISEASE

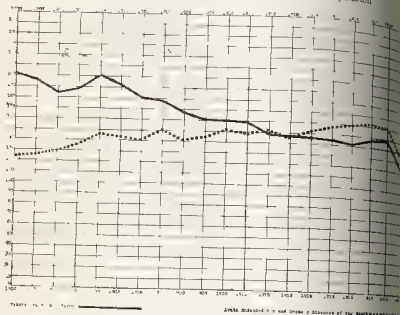
The great destruction of life as a result of heart disease is not brought about with few exceptions by acute processes during adult life, but rather as a result of progressive incapacity of the heart mechanism consequent upon serious damage at some previous age period. It is very generally agreed that this occurs during infancy and early childhood. The known diseases affecting the heart are rheumatism,

chorea, scarlet fever, diphtheria and possibly whooping cough. In the case of the three epidemic diseases quarantine and isolation methods are widely enforced, with the result that medical examination of the chest and heart is a routine procedure with most physicians. This in itself is a safeguard against undetected heart disease and assures the patient, in the majority of cases, skilled advice and treatment.

#### RHEUMATISM AS A CAUSE

The incidence of acute and chronic heart lesions found to exist during and after attacks of rheumatism justifies us in regarding this affection as the reservoir, so to speak, from which most organic heart disease is transmitted to the individual. There is no more insidious disease than rheumatism which manifests itself under a variety of grades of severity from the untreated "growing pains" of young children, the oft repeated sore throat and stiff neck of young adults, to the grave infection known as rheumatic fever with its immediate menace to the patient's life.

Mortality From Tuberculosis (All Forms), Acute Endocarditis and Organic Diseases of the Heart in the Registration Area of the United States 1900-1926—Rate per 100,000 Population



In a series of 172 cases of rheumatism resorted by Peyton 66 per cent. of the children had signs of organic heart disease, 22 per cent. died and 38 per cent. became complete invalids. A still higher incidence of heart involvement in rheumatism is asserted to occur by Holt. In 117 cases of endocarditis 90 per cent. gave a history of previous rheumatism. Among 150 cases of valvular diseases of the heart described by Still a rheumatic history was found in 142 instances.

Whilst heart involvement occurs most frequently in acute rheumatism endocarditis may be present with no symptoms sufficiently urgent to attract attention of parent or physi-

It may occur or follow chorea, tonsillitis, or oral sepsis with or without articular symptoms. The proportion of rheumatic cases in which endocarditis occurs is much greater in children than in adults. In rare instances endocarditis is seen in the course of almost any of the infectious diseases most frequently with scarlet fever, being often associated with pericarditis; but even in these conditions it is possible that it is sometimes rheumatic.

That rheumatism is the cause of disability among industrial workers was shown to be the case in the various sickness surveys of Rochester, Boston, Pennsylvania, North Carolina. Among the white population of Pennsylvania the incidence rate was 127.9 per 100,000 exposed. Among the colored in the same area and in West Virginia the rate was as high as 246.5. The average rate appeared to be 164+ per 100,000 exposed. The high rate among the colored is significant of the relationship between rheumatism and cardiac disease, this latter rate being much higher among the negro than the white population of the Southern States.

#### IS RHEUMATISM AN INFECTIOUS DISEASE?

In its behavior and certain peculiarities rheumatism has many of the characteristics of an infectious disease. Close personal contact, overcrowding and defective personal hygiene appear to influence considerably the prevalence of rheumatism and its disabling complications especially among children. "As soon as school age is reached," says Poynton, "we find a steady increase in the frequency of incidence. On the other hand, acute rheumatism is infrequent among children of school age of parents who are in better circumstances than the hospital class."

If the agency causing the group of rheumatic symptoms is known. Various bacteria, mostly of the coccus form, have been described. Small bacteria of this nature

were observed in rheumatism lesions by Triboulet and by Westphal and Wassermann. It is likely that the diplococcus isolated by Poynton and Paine by culture from the tonsils of cases of rheumatic fever is the same or similar organism. By injection into rabbits, lesions were produced which suggested a similar infection to rheumatism.

Other investigators have found various types of streptococci in rheumatic joints and other rheumatic lesions. In 1913 Rosenau isolated a streptococcus from rheumatic cases with similar pathogenic powers upon animals as the Poynton and Paine diplococcus. Whether the types of bacilli isolated are directly responsible for the rheumatic condition or are secondary invaders is still a matter of conjecture. At least the group of rheumatic symptoms resembles somewhat the conditions existing in known septic conditions produced by the streptococcus family. Certain it is that the marked anemia present in most rheumatic cases is significant of the hemoglobin destroying streptococcus.

Osler is of the opinion that not only does rheumatism become epidemic at times, but possesses features suggestive of septic infection, "in the character of the fever, the arthritis, the tendency to relapse, the sweats, the anemia, the leucocytosis and, above all, in the great liability to endocarditis and to involvement of the serous membranes, the disease resembles pyæmia."

#### CHOREA (ST. VITUS' DANCE)

The association of chorea with rheumatism is now generally acknowledged. So constant is the relationship that the disease has been termed a meningomyelitis of rheumatic origin. The observation of clinicians supports this view, inasmuch as in many cases there is a history of an arthritis or joint inflammation preceding the attack of chorea by months or years. In a number of observations the chorea

has immediately followed upon rheumatic symptoms. About a quarter of all cases of chorea have definite rheumatic histories, in the opinion of Gowers and Rogers. Seventeen per cent. of such rheumatic history was observed by B. Sachs and 21 per cent. by Osler.

#### REMEDIAL MEASURES

Since the time of Sydenham the sufferer from heart disease has been subjected to useless, if well meaning, therapeutic measures. Bleedings with the lancet and dosings with mercurial preparations were remorselessly carried out on early victims. A noted physician even at this period admitted that "many seem to recover under any treatment except with none at all." The claims of digitalis and strophanthus to be sovereign remedies for heart affections have not been substantiated so that, in the words of Poynton, curative treatment for the moment is almost at a standstill.

The medical profession has long regarded a damaged heart as incurable. Medical efforts at relief of symptoms are now more generally directed to the care of the patient, not only in the physical, but also in the social sense. Great strides have been made in recognizing the special treatment and nursing necessary for the cardiac cripple. In the survey made by Emerson for the New York Association for the Prevention and Relief of Heart Disease, covering ten New York hospitals, the requirement of more hospital beds for these patients was emphasized. The situation was found to be unsatisfactory. Among the 98,828 patients treated in the ten hospitals, 4,502 patients, or 4.58 per cent. of all admitted were sufferers from heart lesions.

The need for convalescent home is apparent, as well as an adequate social service follow up, which would include careful supervision of suitable occupations for patients



whose hearts have progressed toward functional compensation. The beneficial results of such hospital treatment as was available was shown in the 51.04 per cent. of the patients who improved, although the mortality was high—36.4 per cent. Emerson concludes that "not less than six, and probably twelve, beds are needed for convalescent care of heart patients for 100 000 population, and that the duration of such convalescent care will be at least three weeks per case."

Pioneer work of great value in combating heart disease has been carried out in New York by the Burke Relief Foundation. Through its Sturgis Research Fund steps were taken to assist in the foundation of a National Cardiac Association, as well as in the setting up of vocational guidance for sufferers from heart disease. In its convalescent home 300 beds are devoted to patients with cardiac defects. Since 1915, 5 000 such cases were treated by specialized methods for recuperation. This institution, a model of its special type, includes in its regime "rest, graduated exercise, continuation schooling, recreation, occupational therapy and beginning vocational guidance and usually some mental and nerve readjustments."

#### CLINICAL STUDY

Opportunity for the clinical study of heart disease both for the student of medicine and for post graduate teaching, is sadly lacking in our great city hospitals as the demand for hospital beds is so urgent that the cardiac case is turned out as quickly as severe symptoms have abated and some form of compensation has been established. The inadequacy of this treatment is evident in the frequent return of these cases for medical treatment, until finally there results the totally disabled individual with a decompensated heart and a definite exhaustion of all reserve powers

In no other disease disability is rest so necessary for recuperation as in heart disease. It is for this reason that the majority of cardiac patients require more extended hospital treatment. Quicker diagnosis of heart lesions would result in earlier and more effective rehabilitation of such cases. Convalescent hospitals where treatment could be given in long periods of observation are recommended by Pearson, Poynton and Moon.

#### IS PREVENTION POSSIBLE?

If we look upon the mortality from organic heart disease as a failure of heart function due to cardiac damage at some period of life, the removal of such causes, if possible, would appear to be a logical and distinctly worthwhile effort. In the majority of cases of heart disease the association of rheumatism has been established. Rheumatism, as has been stated previously, has all the earmarks of an infectious communicable disease. If this is so, then preventive measures hold out the most reasonable hope of control. So widespread is the disease, however, in city communities and so prevalent the majority of its symptoms, especially in children that the public has no knowledge of its insidious onset and remarkable dangers.

The relationship of chorea and rheumatism with heart disease should be stressed in all public health literature. Teachers and school nurses can well be instructed in the occurrence of chorea and rheumatism as a definite indication of a diseased heart. Parents and relatives are inclined to treat "growing pains" in children as of no moment, whereas they may be like frequent attacks of tonsillitis, heralds of an invasion of the heart with the rheumatic virus.

#### A PUBLIC HEALTH PROBLEM

There can be little dissent from the opinion that rheuma

tism, chorea and heart disease are public health problems of the first importance and their solution one which public health administrators should make every effort to accomplish.

Suitable information upon these ailments should be distributed by all health departments by lectures, posters and circulars. The following circular of information is suggested, which might be adopted as part of the ordinary health propaganda among physicians, nurses schools and institutions.

#### HEART DISEASE PREVENTION

1. Heart disease is nearly always the result of rheumatic attack in childhood, either acute or chronic.
2. Rheumatism is an infectious disease caused by bacteria and is most prevalent in spring and fall months.
3. "Growing pains" and frequent 'sore throats' are usually symptoms of a rheumatic attack.
4. Chorea or St. Vitus' dance is rheumatism of the nerve centers and is almost invariably accompanied by heart involvement.
5. Permanently enlarged tonsils and adenoids are the gateways through which the rheumatic virus gains entrance.
6. The heart is most frequently damaged during childhood and permanently disables the child in after life.
7. A nervous child may readily be the victim of a previous attack of rheumatism or heart disease.
8. A child suffering with a damaged heart requires special school work with graded rest periods.
9. If properly cared for in the early stages, the individ-

and with heart disease may look forward to the normal span of life as a useful member of the community.

10. Cardiac cases are not normal individuals and chronic rheumatism may wait upon ignorant treatment of the disease in its initial stages.

11. Medical examination should be advised for all rheumatic or nervous children.

12. Do not neglect childish complaints of tiredness, aches, pains or disinclination to work or play. It is safer to be sure. Call a physician.

Finally, as it is an accepted axiom that the public health agent cannot combat a disease unless he knows of its prevalence, and as the mortality from heart disease indicates only the end results of infective processes beginning in early life, a proper control of heart disease will be possible only if such diseases as rheumatism in all its forms, tonsillitis and chorea be made reportable to the local health authorities.

#### SUMMARY

1. One hundred twenty-four thousand, one hundred and three deaths occurred in the registration area from organic heart disease during 1920.

2. The death rate from organic heart disease for 1920 was 141.9 per 100,000. Ten years previously the rate was 40.9.

3. More deaths reported now from heart disease than for tuberculosis, which formerly held the premier position in United States mortality.

4. Ten years ago the rate from tuberculosis was 159.2 and organic heart disease 140.9 per 100,000. In 1920, the

figures were reversed: Tuberculosis, 114.2, and organic heart disease, 141.9 per 100,000.

5. Highest fatality from heart disease found in the states of Vermont, New Hampshire and Massachusetts. Lowest in Montana, Mississippi, Tennessee, Kentucky and Nebraska.

6. Cardiac disease estimated to be present in 2 per cent. of all the general population in the United States.

7. Among the 139,770 New York school children 14 per cent. were found to be cardiac sufferers.

8. Rheumatic attacks the main cause of all chronic heart lesions. Sixty per cent. of such cases show heart lesions, according to Poynton.

9. Rheumatism has all the appearances of an epidemic infectious disease as shown by the fever, arthritis, sweats, anemia and leucocytosis.

10. Medical effort now directed principally to the relief of symptoms both physically and in social sense.

11. Better opportunity for the clinical study of heart disease required in our hospitals and clinics.

12. If rheumatism is a communicable disease it is also preventable by the usual methods of care of the public by isolation and quarantine.

13. Great need for publicity and education of the public in the danger to the child of rheumatism, growing pains chorea and repeated sore throats.

14. Rheumatism, tonsillitis and chorea should be made reportable to the local health authorities.

ANNUAL REPORT

OF THE

Division of Sanitation

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ANNUAL REPORT  
OF THE  
**Division of Sanitation**

By *Dr. E. L. Craster, M.D., D.P.H., Health Officer*

SIR:—I herewith present the annual report of the  
SANITARY DIVISION for the year ending December 31st 1924

Respectfully,

WILLIAM H. YOUNG,  
*Chief Clerk, Sanitary Division*

SANITARY CONDITION OF THE CITY

At the close of the year we find according to our sanitary inspectors' reports the City of Newark to be in a good sanitary condition. No general clean-up was necessary during the course of the year, owing to the unusual small amount of rubbish and refuse accumulated in attics and cellars during the winter months. The city collection of garbage and refuse has been very satisfactory and it was found that the ordinary spring household debris could be collected by the scavengers on the usual collection days for such material.

A social drive was inaugurated to rid all vacant lots in the city as far as possible of the rank growth of weeds. We find that where weeds are permitted to grow wild on vacant lots, these eventually become the hiding place for mosquitoes, all sorts of rubbish and refuse being dumped on the same.



## IMPROPER VENTILATION OF GARAGES

During the year several cases came to the attention of this department where persons in the city were overcome by carbon monoxide gas while working on automobiles in poorly ventilated garages. These accidents could have been avoided if the garages were properly ventilated and the fumes permitted to escape.

On investigation we found that proper ventilation is lacking in most of the individual garages in the city, the only means of ventilation afforded is by opening the front doors. Owing to the very serious results from the inhalation of carbon monoxide gas it is absolutely essential that small private garages when being erected should be provided with some means of permanent ventilation other than doors. Often in cold weather persons will go to the garage close the doors tight, start the motor of their cars and proceed to make whatever repairs they deem necessary, and due to their inability to detect any odors that may be generated by the running of the engines they are quickly overcome necessitating their removal to a hospital and very often these accidental cases turn out to be very serious resulting in the death of the victim.

## DOG MUZZLING ORDINANCE

On July 1st, 1924, the City Commission passed an ordinance compelling the owner of all dogs in the city of Newark to properly muzzle same during the months of June, July, August and September, excepting dogs on a leash or chained on private premises.

The Sanitary Division detailed three motorcycle inspectors during the summer months to round up all unmuzzled dogs found on the streets. As a result of the campaign two hundred and sixty five owners of dogs were summoned to court to answer charges of permitting their dogs to run

a large muzzle. These violators were either reprimanded or fined in the discretion of the magistrate presiding.

It became necessary to adopt such an ordinance owing to the increased number of dog bite cases reported in the summer months during the past few years, also on account of the number of rabid dogs detected and the increased number of hydrophobia cases reported as the result of persons bitten.

The passage of this ordinance no doubt reduced the number of dog bite cases during the summer months and we are confident that after a fair trial the general public will realize the necessity of such a law and will co-operate with the authorities and report any violation they come in contact with. Preventing dogs from roaming at large uncontrolled is a positive way to stamp out the evil of dog bite cases.

The majority of dog bite cases are reported during the summer. Due to the warm weather dogs become more susceptible to hydrophobia and to lesser such cases should be the endeavor of all persons interested in the preservation of health.

The following is the Dog Muzzling Ordinance adopted by the Board of Commissioners of the City of Newark, N. J., in 1924:

An Ordinance concerning the muzzling and Regulation of Dogs for the purpose of controlling rabies in the City of Newark.

THE BOARD OF COMMISSIONERS OF THE CITY OF NEWARK,  
ENACTS:

That the owner of every dog in the City of Newark during the months of June, July, August and September of each year shall cause said dog to be adequately and properly

muzzled: *Provided, however,* that this shall not apply to dogs on a leash or chained on private premises.

2. Any person or persons violating this ordinance shall, upon conviction pay a penalty of not less than ten dollars, nor more than twenty five dollars for the first offense and not less than twenty five dollars or more than fifty dollars for the second or subsequent offenses.

3. This ordinance shall take effect immediately.

#### ILLUMINATING GAS POISONING

During the year a number of deaths were reported to this department of illuminating gas poisoning. All such deaths are investigated by our sanitary inspectors who usually find that most of the deaths are accidental, caused by defective gas tubing. It seems that in the majority of furnished room and lodging houses in the city the only means of heating is by a gas plate or heater, and if the appliance is not absolutely gas tight there is always the danger of gas asphyxiation to the occupants of such places.

Owing to the desultory methods of installing these appliances this department has inserted a section in the proposed new plumbing code that will prohibit the use of such fixtures.

Section 122 reads as follows:

Gas appliances and connections: Each gas range, gas heater, gas hot water heater or any gas appliance installed in any building which is made or arranged to exhaust smoke, fumes or uncombusted gas shall be connected to an exhaust pipe of sheet metal or brick or tile flue

This pipe or flue shall be extended to the outer air in such manner as shall permit the free passage of smoke or fumes. The pipe or flue shall not be less than four inches

in diameter inside and shall be separate and independent from any other pipe or flue. The joints and connections shall be gas and air tight.

Each gas heater, gas range, gas hot water heater, gas water heater or other gas appliance shall be supplied with gas through standard wrought iron or wrought steel pipes. The connection of such pipes shall be made by screwed joints and fittings and all such connections shall be gas and air tight. Stop cocks shall be installed to control each gas burner.

The use of rubber hose or any flexible metal or other such material for conducting gas to any gas appliance is hereby prohibited, excepting however, where gas is used in manufacturing processes. In such instances the Department of Health may permit an improved flexible connection.

#### THE FLY NUISANCE

For many years anti fly crusades have been waged in cities and towns in almost every section of the country. We have become familiar with such phrases as "Swat the Fly," "Keep Them Out," "Screen Early," etc. But how many of us really know why we should be fly fighters?

We should be fly fighters because the fly is one of the most dangerous and insidious enemies we have. Flies sit at the same table with us. They eat out of the same dish. They drink out of the same cup, and in doing so the common house fly causes more sickness and misery and destroys more peace and health and happiness than any other creature. They are the greatest known carriers of filth and disease.

A few years ago flies were looked upon as scavengers. They were thought of as a necessary evil, but fortunately a different attitude is taken at the present time, and every

precaution should be taken to eliminate them from the household. If it were not for the fact that the fly breeds and multiplies by the million, they would have been annihilated long ago.

Aside from its germ-carrying propensities, the fly is filthy and dirty. Its principal breeding place is in horse manure, in garbage cans and in filth of every description. Flies are born in filth, they breed in filth and they carry filth.

The fly is insidious. He lurks in every corner. He plants his deadly germs everywhere and once he gains entrance his ugly presence is sure to be felt.

Until comparatively recent years, the common house fly, like the mosquito, though considered an irritating discomfort, was thought to be otherwise harmless. Even now, though the house fly is recognized by the best sanitary authorities as a dangerous disease carrier, comparatively few families recognize it as such. But the inauguration of such anti fly campaigns as those now being carried on in many cities and states cannot fail to quicken the popular recognition of the necessity of abating the fly nuisance.

It is well to "Swat the Fly" but it is better to "Stop the Fly," to keep him out by screening doors and windows.

Householders should make it their duty to see that all doors and windows are properly screened during the summer months.

#### INSPECTIONS MADE DURING THE YEAR IN THE INTEREST OF THE ANTI FLY CAMPAIGN

Stables and cow barns.....	2,225
Manure accumulations.....	443
Manure bins and pits uncovered.....	433
Garbage and refuse accumulation.....	2,872
Scavenger dumping grounds.....	92

Number of yards inspected	29,284
Number of yards found insanitary	3,590

### INSPECTIONS MADE BY THE SANITARY INSPECTORS DURING THE YEAR 1924

Number of inspections made	124,02
Inspections from complaint cards	6,300
Inspections made	116,51
Number of inspections made	1,262
Number of re-inspections made	37,566
Number of nuisances found	26,447
Number of verbal notices served	9,377
Number of written notices served	6,396
Number of special notices served	276
Number of notices served	16,049
Verbal notices from verbal notices	8,821
Verbal notices from written notices	9,875
Verbal notices from special notices	160
Number of abatements	16,856
Verbal notices served	18,124
Verbal notices insanitary	3,237
Verbal notices inspected	7,523
Verbal notices insanitary	1,364
Verbal notices inspected	21,448
Verbal notices insanitary	2,678
Verbal notices inspected	29,286
Verbal notices insanitary	3,590
Number of inspections of cattle and chicken slaughter houses	5,476
Number of cattle and chicken slaughter houses insanitary	427
Number of wells inspected	5
Number of wells insanitary	2
Number of wells inspected	1
Number of wells insanitary	1
Number of streets inspected	1,037
Number of streets insanitary	132
Number of streets inspected	852
Number of streets insanitary	16
Number of streets inspected	5,598
Number of streets insanitary	568
Number of houses inspected	16,134
Number of houses insanitary	1,394

Houses unfit for habitation	10
Living rooms insanitary	2,589
Dark and windowless rooms	420
Theatres inspected	30
Theatres insanitary	616
Buildings with no city water supply	17
Buildings unprovided with water closets or privy vaults	420
Buildings with roofs, storm gutters or leaders defective	26
Plumbing in or on premises defective	1,504
Sewer connections ordered installed	1,994
Pits under water closets defective	33
Water closets not supplied with water	145
Privy vaults and cesspools inspected	1,334
Privy vaults and cesspools insanitary	119
Privy vaults and houses ordered re-constructed	25
Privy vaults ordered cleaned and filled in	10
Garbage and refuse accumulation	21
Stables inspected	2,672
Stables insanitary	2,225
Manure accumulations	389
Manure bins and pits uncovered	443
Streets insanitary	433
Visits to agents and owners of real estate	32
Warning cards handed to violators of spitting ordinance	1,128
Arrests made for violating the spitting ordinance	222
Days detailed to enforce spitting ordinance	19
Number of spitting signs posted	19
Number of hours in court	90
Number of inspections for chicken and ice permits	613
Notices served for inspectors assigned to other districts	1,274
Dead animals reported	2,146
Complaints referred to other city departments	293
Number of scavenger dumping grounds inspections	179
Number of quick summons served	92
Home work applications investigated	417
Inspections of a miscellaneous nature	1,570
	5,123

# LIST AND NUMBER OF LICENSES ISSUED BY THE SANITARY DIVISION FOR THE YEAR 1924 AS COMPARED WITH THE YEAR 1923

	1924	1923
CANNED LICENSES	1,336	1,531
ALCOHOLIC PERMITS	55	33
RESTAURANT LICENSES	8	8
HOUSE PERMITS	37	36
HOUSE PERMITS	414	388
HOUSE PERMITS	34	34
HOUSE PERMITS	1	1
HOUSE PERMITS	57	51
HOUSE PERMITS	29	25

## LEGAL PROCEEDINGS

There were three hundred and thirty-seven (337) cases entered in the Law Department for legal action. Judgment was obtained in fifty-five (55) cases. Two hundred and twenty-nine (229) cases were discontinued on payment of costs owing to the violations complained of being abated. Fourteen cases were presented in court. Fourteen cases were discontinued without the payment of costs, work being done. Seven cases pending at the end of year. No recovery obtainable on thirty-two cases.

In addition to the above, four hundred and seventeen (417) twenty-four hour court summonses were served. It was necessary to serve these summonses as the condition complained of required immediate abatement, and would warrant the usual court procedure.



**ANNUAL REPORT OF  
CHIEF SANITARY INSPECTOR**

*Dr. Charles V. Craster, Health Officer.*

DEAR DOCTOR: -I herewith submit my report for the year ending December 31st, 1924.

Respectfully,

ANDREW J. BRADY,  
*Chief Sanitary Inspector*

My duties as Chief Sanitary Inspector bring me in all sections of the city, and it affords me great satisfaction to report that the general sanitary condition of our city is very good and it shows a steady improvement.

The city is divided into sixteen wards or districts. Each district is covered by a trained sanitary inspector who is responsible for the sanitary condition of his respective district. It is the duty of the inspector to make house to house inspections of all buildings, both private and public and all other health work assigned him by the Health Officer.

In addition to the regular district inspectors there are five experienced inspectors detailed on complaints entered or made to the Health Department. It is the duty of the Complaint Inspector to investigate all complaints and after making a thorough inspection to submit a written report of their investigations, and where insanitary conditions prevail or any violation exists the owner of the premises or person responsible for the violation is served with a written notice of the violation. This notice is followed up by the inspector until such time as the condition is remedied or after due notice the matter is turned over for prosecution.

The removal of ashes, rubbish and garbage throughout the entire city has been very satisfactory. Complaints entered were very few. In some isolated instances the rule separating garbage from ashes and rubbish was not strictly enforced. The garbage collected goes to the City dump for feeing pigs while ashes and rubbish are dumped at the city dumps.

During the year 1924 thirty-seven thousand feet of sewer were laid which leaves streets well provided with sewer system. The high pressure and low pressure water mains have been substantially increased, thus insuring a plentiful supply of water for all purposes. During the year 7.26 miles of new pavement was completed and 12 miles of city streets were resurfaced. Though some improvements have been made in paving of streets there is much to be desired.

The housing conditions in Newark are back to normal. There is a present a sufficient supply of apartments and private houses to supply the demand. The crusade against all dilapidated tenement houses unfit for habitation and other unsound buildings and places of public nuisances has made great progress. The house to house canvass by our inspectors has resulted in removing and abating many nuisances.

The Clean Up Week conducted every spring by the Department of Public Works is a very meritorious idea. It is a thoroughly educational and has a very good sanitary result in that it disposes of the winter accumulation of debris in cellars, yards and attics.

The filling in of low marsh land and other excavations, as well as the constant inspection of tanks and other water containers, has caused the elimination of mosquito breeding in Newark.

The gradual passing of the horse and cow has removed from the city limits to a very great extent many stables, barns, manure pits and piles, thus eliminating many breeding places for flies.

The cutting down and removing of poisonous weeds on vacant lots throughout the city was a commendable work in that it has removed not only the dangerous plants but it makes less possible other nuisances.

The abandonment of the Morris Canal has removed a death trap and the cause of many nuisances, though the bed of the canal is still an eyesore and an inviting place for dumping rubbish and other refuse.

The following are the number of visits made to the Water Shed for inspections and samples of city water taken for bacteriological and chemical examinations:

Number of visits to Water Shed, ..... 28

#### NUMBER OF SAMPLES TAKEN

Oak Ridge Stream	24
Clinton Stream	24
Karouse Stream	24
Fish Lake Stream	24
Macopin Intake (inside of gatehouse)	24
Cedar Grove Reservoir (outside of inlet gatehouse)	22
Cedar Grove Reservoir (outside of outlet gatehouse)	24
Belleville Reservoir (inside of inlet gatehouse)	24
Belleville Reservoir (outside of outlet gatehouse)	24
Department of Health Building	24
Prudential Insurance Company, 763 Broad St., before filtration	18
Prudential Insurance Company, 763 Broad St., after filtration	18
480 Clifton Avenue (city water)	1
City water filtration	1
Total	276

## SAMPLES OF WELL WATER TAKEN IN THIS CITY

Well on corner of Abington and Third Aves	3
Well 53 Washington Street	8
Well 278 Ogden Street	1
Well 74 Johnson Avenue	1
Well 38 Wolcott Terrace	1
Total	14

## SAMPLES OF WELL WATER TAKEN OUTSIDE OF CITY

Well on city property Cedar Grove, N. J.	2
Well and spring on farm, Utertownt, N. J.	3
Well and tank, Idyl ease Inn, Newfoundland, N. J.	4
Well on John Weller property Echo Lake N. J.	2
Well on Fairfield Dairy, Fairfield, N. J.	2
Well on Fairfield Dairy Fairfield, N. J.	2
Well and tank, St. Francis Home, Denville N. J.	3
Total	18

## SAMPLES OF ICE TAKEN

Ice, Essex Ice Co., 244 Murray Street	1
Ice, Mountain Ice Co., 145 Murray Street	1
Ice, Knickerbocker Ice Co., 73 Hayes Street	1
Ice, City Hospital, Fairmount Avenue	1
Ice, Knickerbocker Ice Co., 136 Rose Street	1
Ice, Mountain Ice Co., 103 Newark Street	1
Ice, North Newark Ice Co., 26 Sylvan Avenue	1
Ice, Feigenspan Ice Co., 50 Freeman Street	1
Total	8

SAMPLES OF WATER TAKEN FROM INDOOR  
SWIMMING POOLS AND MIKVES

Bath 188 Broome St.—Pool 21 Mikveh 19	4
Bath 36 Charlton St.—Pool 38 Mikveh 16	38
Bath 147 Howard St.—Pool 18, Mikveh 4	22
Bath 32 Mercer St.—Pool	22
W. C. A., 53 Washington St.—Pool	22
Bath 10 West Park St.—Pool	21

Y. M. C. A., 107 Halsey St. Pool	22
City Bath, 12 Paterson St.—Pool	18
Newark A. C., 22 24 Park Place Pool	19
Y. M. and Y. W. Hebrew Ass'n Pool	16
Jewish Temple So. 10th St. and Clinton Ave.—Pool	2
Total	77

#### SAMPLES OF WATER TAKEN FROM OUTDOOR SWIMMING AND WADING POOLS

Branch Brook Park Wading Pool	2
West Side Park Wading Pool	1
Weequahic Park Wading Pool	1
Dreamland Park Swimming Pool	7
Total	11

Total number of samples taken from all sources and delivered to Dr. Richard N. Connolly for bacteriological analysis was five hundred and sixty-two (562)

#### SAMPLES OF CITY WATER TAKEN FOR CHEMICAL ANALYSIS

Oak Ridge Stream	4
Clinton Stream	4
Kanouse Stream	4
Echo Lake Stream	4
Macopin Intake	1
Cedar Grove Reservoir (outside inlet gatehouse)	4
Cedar Grove Reservoir (outside inlet gatehouse)	4
Lehigh Reservoir (inside inlet gatehouse)	4

#### WELL WATER

Driven well, Abington and Third Avenues	2
Total number of chemical samples taken	33

The above samples were delivered to the City Chemists, Mr. Baldwin and Mr. Durand for chemical analysis.

Health Inspector Boutiller assisted in taking water samples.

## MISCELLANEOUS INSPECTIONS MADE

Public Houses	11
Schools	26
and Private Schools	18
Hospitals	16
and Asylums and other institutions	12
and Asylums	8
and Asylums	10
and Asylums	13
and Asylums	4
and Asylums	210
and Asylums	71
and Asylums	25
and Asylums	3
and Asylums	15
and Asylums	5
and Asylums	6
and Asylums	3
and Asylums	5
and Asylums	21
and Asylums	53
and Asylums	31
and Asylums	27
and Asylums	53
and Asylums	9
and Asylums	33
Total	777

Number of re-inspections from all sources 214

On all my trips to and from the Water Shed I found the toilet room doors in the Susquehanna Railroad passenger cars closed while passing through the Water Shed

Number of days at Water Shed	38
Number of inspections made in Water Shed	133
Number of official calls made in Water Shed	26
Number of reports made on conditions found in Shed	8
Days detained in office	15
Days in court	7

I investigated several complaints of book agents representing themselves as nurses from the Department of Health for the purpose of gaining admittance to homes also as an inducement for the people to buy said books. Several such agents were brought before the Health Officer and reprimanded for this practice.

## REPORT OF DETAILED INSPECTION ON RABIES

by V. Craster, Health Officer

I herewith present my annual report on investigations for the year ending December 31, 1924

Respectfully,

CHARLES F. CONRAD,  
*Health Inspector*

This year has again been marked by an exception in the prevalence of dog bites and rabid dogs, with the increase in the number of animals examined. The number of persons given Pasteur treatment, however, was about the same as the preceding year. A total of 1,169 persons were given treatment as compared with 955 in 1923. One hundred and seventy-two animals' brains and one human brain were examined of which 74 were positive including 25 Newark cases. Last year 163 were so examined of which 67 were positive. Twenty three of this number were Newark cases.

M. of Bloomfield Avenue, age 52, died of rabies at St. Gerard's Hospital, February 9, 1924. Victim, together with his wife, was bitten on the fingers by his own dog on August 20, 1923. Dog was shot by police, brain was examined the same day and proved positive. Wound had been treated immediately after bite. Victim started Pasteur treatment the following day, August 21, 1923. Final treatment September 11, 1923. Returned September 30, 1923. General examination and was found normal. On February 4, 1924 (almost six months after bite) victim complained of pains in shoulder. February 5, 1924 pain in shoulder. Admitted to St. Gerard's Hospital for treatment. Victim refused to remain, broke away from attendants and ran home. Police were notified and after considerable effort



The following is a list of positive and negative results of city cases for the year 1924. Paterson, N. J. had the largest number of rabid dogs from out of city cases examined.

# POSITIVE AND NEGATIVE CASES FROM OUT OF CITY

	Pos	Neg.		Pos	Neg.
Paterson, N. J.	13	11	Lyndhurst, N. J.	2	0
Bloomfield, N. J.	4	10	So. Mountain Res.	2	0
Irvington, N. J.	5	3	W. Orange, N. J.	1	0
Clifton, N. J.	4	4	Glenridge, N. J.	1	0
Summit, N. J.	3	0	Woodridge, N. J.	1	0
Belleville, N. J.	2	4	N. w. Providence, N. J.	1	0
Rutherford, N. J.	2	2	Springfield, N. J.	1	0
Madison, N. J.	2	1	Montclair, N. J.	0	1
Maplewood, N. J.	1	0	Scotch Plains, N. J.	1	0
Verona, N. J.	1	0	Haddon, N. J.	0	1
No. Arlington, N. J.	1	0	Haskell, N. J.	0	1
Fair Lawn, N. J.	1	0	Point Pleasant, N. J.	0	1
Hillside, N. J.	0	2			

\*Four dogs of this number which proved positive cases and previously been vaccinated against rabies

The following table shows the number of persons who were found to be infected with the disease in the wards of the hospital during the month of July 1900.

Wards	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
Chairs	68	53	0	5	34	90	52	90	83	32	47	79	151	83	117	1169	

The table shows that the largest number of persons who were found to be infected with the disease in the wards of the hospital during the month of July 1900, was found in the wards of the hospital during the month of July 1900, as compared with the same months last year, 1900, 98, 88, 70.

The largest number of rabid dogs were found in the Eight Ward (7). The Second, Fifth, Tenth, and Fifteenth Wards, were free from Rabid Dogs.

Wards	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
Rabid Dogs	3	0	1	1	0	1	1	7	2	0	3	1	2	1	0	1	24

The following table shows the number of persons and suspected animal brains examined, positive and negative cases, and persons given Pasteur treatment in New York, 1910:

	Persons Bitten	Animals Examined	Positive Cases	Negative Cases	Persons Given Treatment
1910	218	33	21	12	46
1911	350	28	13	15	26
1912	536	46	21	25	62
1913	612	43	17	26	4
1914	509	30	7	23	3
1915	566	38	3	35	3
1916	432	17	3	14	4
1917	505	42	20	22	3
1918	565	25	15	10	4
1919	493	19	5	14	4
1920	465	19	4	15	8
1921	539	16	0	16	1
1922	654	59	28	31	12
1923	955	163	67	96	92
1924	1,169	173	74	99	57
Total	8,569	751	298	453	400

## ANNUAL REPORT ON INDUSTRIAL HYGIENE

By V. Craster, Health Officer.

I herewith submit my report for the year 1921.

Respectfully,

CHAS. H. McLAUGHLIN,  
Detailed Health Inspector.

Following is a review of the Industrial Hygiene activities for the year:

## OCCUPATIONAL DISEASE

Number of cases investigated.....	21
Number of cases investigated.....	1
Number of cases investigated.....	8
Total number investigated.....	30

## INSPECTIONS

Factory inspections.....	716
Inspections made with other inspectors.....	95
Inspections made on city.....	43
Poultry slaughter houses inspected.....	42
Public buildings.....	50
Noise complaints investigated.....	44
Spanish and Portuguese lodging houses inspected.....	60
Fat rendering plants.....	35
Total official calls.....	3,831

## RE-INSPECTIONS

Number of factory re-inspections.....	334
Number of poultry slaughter houses re-inspected.....	15
Number of fat rendering plants.....	17



ANNUAL REPORT

OF THE

Contagious Disease Division



# ANNUAL REPORT

## OF THE

### Contagious Disease Division

To: Charles V. Craster, Health Officer.

SIR:—I herewith submit to you the report of the Contagious Disease Division for the year ending December 31, 1924.

Respectfully,

IRWIN C. DAKIN,  
Chief, Contagious Disease Division.

These reports, consisting of a general table of the various communicable diseases by wards, a table of each disease by ward, a table of all diseases (excepting venereal) in age groups and a report of the activities of the Contagious Disease Division, show a decrease over 1923 in a number of the following diseases listed, although an increase is shown in scarlet fever, German measles, whooping cough and small pox.

	1924	1923
Diphtheria including membranous croup, placarded	575	634
Scarlet fever, placarded	1,011	596
Measles, placarded	13,030	4,680
Polio paralysis, placarded	12	48
Small pox	4	0
Epidemic meningitis	18	20
Typhoid fever	47	96
German measles	2,561	212
Whooping cough	2,229	1,124
Influenza	338	1,462



## DISINFECTIIONS

Diphtheria	1924	7532
Scarlet fever	586	67
Tuberculosis	872	50
Epidemic meningitis	574	564
Infantile paralysis	18	4
Small pox	12	6
Special	4	144
	173	

## MISCELLANEOUS

Visits and re-inspections	1924	1922
Nuisances found	40,168	34,806
Funerals supervised	64	116
Number of rooms disinfected	116	46
	7921	7,124

	Col. 1	Col. 2	Col. 3	Col. 4	Col. 5	Col. 6	Col. 7	Col. 8	Col. 9	Col. 10	Col. 11	Col. 12	Col. 13	Col. 14	Col. 15	Col. 16	Col. 17	Col. 18	Col. 19	Col. 20	Col. 21	Col. 22	Col. 23	Col. 24	Col. 25	Col. 26	Col. 27	Col. 28	Col. 29	Col. 30	Col. 31	Col. 32	Col. 33	Col. 34	Col. 35	Col. 36	Col. 37	Col. 38	Col. 39	Col. 40	Col. 41	Col. 42	Col. 43	Col. 44	Col. 45	Col. 46	Col. 47	Col. 48	Col. 49	Col. 50	Col. 51	Col. 52	Col. 53	Col. 54	Col. 55	Col. 56	Col. 57	Col. 58	Col. 59	Col. 60	Col. 61	Col. 62	Col. 63	Col. 64	Col. 65	Col. 66	Col. 67	Col. 68	Col. 69	Col. 70	Col. 71	Col. 72	Col. 73	Col. 74	Col. 75	Col. 76	Col. 77	Col. 78	Col. 79	Col. 80	Col. 81	Col. 82	Col. 83	Col. 84	Col. 85	Col. 86	Col. 87	Col. 88	Col. 89	Col. 90	Col. 91	Col. 92	Col. 93	Col. 94	Col. 95	Col. 96	Col. 97	Col. 98	Col. 99	Col. 100	Col. 101	Col. 102	Col. 103	Col. 104	Col. 105	Col. 106	Col. 107	Col. 108	Col. 109	Col. 110	Col. 111	Col. 112	Col. 113	Col. 114	Col. 115	Col. 116	Col. 117	Col. 118	Col. 119	Col. 120	Col. 121	Col. 122	Col. 123	Col. 124	Col. 125	Col. 126	Col. 127	Col. 128	Col. 129	Col. 130	Col. 131	Col. 132	Col. 133	Col. 134	Col. 135	Col. 136	Col. 137	Col. 138	Col. 139	Col. 140	Col. 141	Col. 142	Col. 143	Col. 144	Col. 145	Col. 146	Col. 147	Col. 148	Col. 149	Col. 150	Col. 151	Col. 152	Col. 153	Col. 154	Col. 155	Col. 156	Col. 157	Col. 158	Col. 159	Col. 160	Col. 161	Col. 162	Col. 163	Col. 164	Col. 165	Col. 166	Col. 167	Col. 168	Col. 169	Col. 170	Col. 171	Col. 172	Col. 173	Col. 174	Col. 175	Col. 176	Col. 177	Col. 178	Col. 179	Col. 180	Col. 181	Col. 182	Col. 183	Col. 184	Col. 185	Col. 186	Col. 187	Col. 188	Col. 189	Col. 190	Col. 191	Col. 192	Col. 193	Col. 194	Col. 195	Col. 196	Col. 197	Col. 198	Col. 199	Col. 200	Col. 201	Col. 202	Col. 203	Col. 204	Col. 205	Col. 206	Col. 207	Col. 208	Col. 209	Col. 210	Col. 211	Col. 212	Col. 213	Col. 214	Col. 215	Col. 216	Col. 217	Col. 218	Col. 219	Col. 220	Col. 221	Col. 222	Col. 223	Col. 224	Col. 225	Col. 226	Col. 227	Col. 228	Col. 229	Col. 230	Col. 231	Col. 232	Col. 233	Col. 234	Col. 235	Col. 236	Col. 237	Col. 238	Col. 239	Col. 240	Col. 241	Col. 242	Col. 243	Col. 244	Col. 245	Col. 246	Col. 247	Col. 248	Col. 249	Col. 250	Col. 251	Col. 252	Col. 253	Col. 254	Col. 255	Col. 256	Col. 257	Col. 258	Col. 259	Col. 260	Col. 261	Col. 262	Col. 263	Col. 264	Col. 265	Col. 266	Col. 267	Col. 268	Col. 269	Col. 270	Col. 271	Col. 272	Col. 273	Col. 274	Col. 275	Col. 276	Col. 277	Col. 278	Col. 279	Col. 280	Col. 281	Col. 282	Col. 283	Col. 284	Col. 285	Col. 286	Col. 287	Col. 288	Col. 289	Col. 290	Col. 291	Col. 292	Col. 293	Col. 294	Col. 295	Col. 296	Col. 297	Col. 298	Col. 299	Col. 300	Col. 301	Col. 302	Col. 303	Col. 304	Col. 305	Col. 306	Col. 307	Col. 308	Col. 309	Col. 310	Col. 311	Col. 312	Col. 313	Col. 314	Col. 315	Col. 316	Col. 317	Col. 318	Col. 319	Col. 320	Col. 321	Col. 322	Col. 323	Col. 324	Col. 325	Col. 326	Col. 327	Col. 328	Col. 329	Col. 330	Col. 331	Col. 332	Col. 333	Col. 334	Col. 335	Col. 336	Col. 337	Col. 338	Col. 339	Col. 340	Col. 341	Col. 342	Col. 343	Col. 344	Col. 345	Col. 346	Col. 347	Col. 348	Col. 349	Col. 350	Col. 351	Col. 352	Col. 353	Col. 354	Col. 355	Col. 356	Col. 357	Col. 358	Col. 359	Col. 360	Col. 361	Col. 362	Col. 363	Col. 364	Col. 365	Col. 366	Col. 367	Col. 368	Col. 369	Col. 370	Col. 371	Col. 372	Col. 373	Col. 374	Col. 375	Col. 376	Col. 377	Col. 378	Col. 379	Col. 380	Col. 381	Col. 382	Col. 383	Col. 384	Col. 385	Col. 386	Col. 387	Col. 388	Col. 389	Col. 390	Col. 391	Col. 392	Col. 393	Col. 394	Col. 395	Col. 396	Col. 397	Col. 398	Col. 399	Col. 400	Col. 401	Col. 402	Col. 403	Col. 404	Col. 405	Col. 406	Col. 407	Col. 408	Col. 409	Col. 410	Col. 411	Col. 412	Col. 413	Col. 414	Col. 415	Col. 416	Col. 417	Col. 418	Col. 419	Col. 420	Col. 421	Col. 422	Col. 423	Col. 424	Col. 425	Col. 426	Col. 427	Col. 428	Col. 429	Col. 430	Col. 431	Col. 432	Col. 433	Col. 434	Col. 435	Col. 436	Col. 437	Col. 438	Col. 439	Col. 440	Col. 441	Col. 442	Col. 443	Col. 444	Col. 445	Col. 446	Col. 447	Col. 448	Col. 449	Col. 450	Col. 451	Col. 452	Col. 453	Col. 454	Col. 455	Col. 456	Col. 457	Col. 458	Col. 459	Col. 460	Col. 461	Col. 462	Col. 463	Col. 464	Col. 465	Col. 466	Col. 467	Col. 468	Col. 469	Col. 470	Col. 471	Col. 472	Col. 473	Col. 474	Col. 475	Col. 476	Col. 477	Col. 478	Col. 479	Col. 480	Col. 481	Col. 482	Col. 483	Col. 484	Col. 485	Col. 486	Col. 487	Col. 488	Col. 489	Col. 490	Col. 491	Col. 492	Col. 493	Col. 494	Col. 495	Col. 496	Col. 497	Col. 498	Col. 499	Col. 500	Col. 501	Col. 502	Col. 503	Col. 504	Col. 505	Col. 506	Col. 507	Col. 508	Col. 509	Col. 510	Col. 511	Col. 512	Col. 513	Col. 514	Col. 515	Col. 516	Col. 517	Col. 518	Col. 519	Col. 520	Col. 521	Col. 522	Col. 523	Col. 524	Col. 525	Col. 526	Col. 527	Col. 528	Col. 529	Col. 530	Col. 531	Col. 532	Col. 533	Col. 534	Col. 535	Col. 536	Col. 537	Col. 538	Col. 539	Col. 540	Col. 541	Col. 542	Col. 543	Col. 544	Col. 545	Col. 546	Col. 547	Col. 548	Col. 549	Col. 550	Col. 551	Col. 552	Col. 553	Col. 554	Col. 555	Col. 556	Col. 557	Col. 558	Col. 559	Col. 560	Col. 561	Col. 562	Col. 563	Col. 564	Col. 565	Col. 566	Col. 567	Col. 568	Col. 569	Col. 570	Col. 571	Col. 572	Col. 573	Col. 574	Col. 575	Col. 576	Col. 577	Col. 578	Col. 579	Col. 580	Col. 581	Col. 582	Col. 583	Col. 584	Col. 585	Col. 586	Col. 587	Col. 588	Col. 589	Col. 590	Col. 591	Col. 592	Col. 593	Col. 594	Col. 595	Col. 596	Col. 597	Col. 598	Col. 599	Col. 600	Col. 601	Col. 602	Col. 603	Col. 604	Col. 605	Col. 606	Col. 607	Col. 608	Col. 609	Col. 610	Col. 611	Col. 612	Col. 613	Col. 614	Col. 615	Col. 616	Col. 617	Col. 618	Col. 619	Col. 620	Col. 621	Col. 622	Col. 623	Col. 624	Col. 625	Col. 626	Col. 627	Col. 628	Col. 629	Col. 630	Col. 631	Col. 632	Col. 633	Col. 634	Col. 635	Col. 636	Col. 637	Col. 638	Col. 639	Col. 640	Col. 641	Col. 642	Col. 643	Col. 644	Col. 645	Col. 646	Col. 647	Col. 648	Col. 649	Col. 650	Col. 651	Col. 652	Col. 653	Col. 654	Col. 655	Col. 656	Col. 657	Col. 658	Col. 659	Col. 660	Col. 661	Col. 662	Col. 663	Col. 664	Col. 665	Col. 666	Col. 667	Col. 668	Col. 669	Col. 670	Col. 671	Col. 672	Col. 673	Col. 674	Col. 675	Col. 676	Col. 677	Col. 678	Col. 679	Col. 680	Col. 681	Col. 682	Col. 683	Col. 684	Col. 685	Col. 686	Col. 687	Col. 688	Col. 689	Col. 690	Col. 691	Col. 692	Col. 693	Col. 694	Col. 695	Col. 696	Col. 697	Col. 698	Col. 699	Col. 700	Col. 701	Col. 702	Col. 703	Col. 704	Col. 705	Col. 706	Col. 707	Col. 708	Col. 709	Col. 710	Col. 711	Col. 712	Col. 713	Col. 714	Col. 715	Col. 716	Col. 717	Col. 718	Col. 719	Col. 720	Col. 721	Col. 722	Col. 723	Col. 724	Col. 725	Col. 726	Col. 727	Col. 728	Col. 729	Col. 730	Col. 731	Col. 732	Col. 733	Col. 734	Col. 735	Col. 736	Col. 737	Col. 738	Col. 739	Col. 740	Col. 741	Col. 742	Col. 743	Col. 744	Col. 745	Col. 746	Col. 747	Col. 748	Col. 749	Col. 750	Col. 751	Col. 752	Col. 753	Col. 754	Col. 755	Col. 756	Col. 757	Col. 758	Col. 759	Col. 760	Col. 761	Col. 762	Col. 763	Col. 764	Col. 765	Col. 766	Col. 767	Col. 768	Col. 769	Col. 770	Col. 771	Col. 772	Col. 773	Col. 774	Col. 775	Col. 776	Col. 777	Col. 778	Col. 779	Col. 780	Col. 781	Col. 782	Col. 783	Col. 784	Col. 785	Col. 786	Col. 787	Col. 788	Col. 789	Col. 790	Col. 791	Col. 792	Col. 793	Col. 794	Col. 795	Col. 796	Col. 797	Col. 798	Col. 799	Col. 800	Col. 801	Col. 802	Col. 803	Col. 804	Col. 805	Col. 806	Col. 807	Col. 808	Col. 809	Col. 810	Col. 811	Col. 812	Col. 813	Col. 814	Col. 815	Col. 816	Col. 817	Col. 818	Col. 819	Col. 820	Col. 821	Col. 822	Col. 823	Col. 824	Col. 825	Col. 826	Col. 827	Col. 828	Col. 829	Col. 830	Col. 831	Col. 832	Col. 833	Col. 834	Col. 835	Col. 836	Col. 837	Col. 838	Col. 839	Col. 840	Col. 841	Col. 842	Col. 843	Col. 844	Col. 845	Col. 846	Col. 847	Col. 848	Col. 849	Col. 850	Col. 851	Col. 852	Col. 853	Col. 854	Col. 855	Col. 856	Col. 857	Col. 858	Col. 859	Col. 860	Col. 861	Col. 862	Col. 863	Col. 864	Col. 865	Col. 866	Col. 867	Col. 868	Col. 869	Col. 870	Col. 871	Col. 872	Col. 873	Col. 874	Col. 875	Col. 876	Col. 877	Col. 878	Col. 879	Col. 880	Col. 881	Col. 882	Col. 883	Col. 884	Col. 885	Col. 886	Col. 887	Col. 888	Col. 889	Col. 890	Col. 891	Col. 892	Col. 893	Col. 894	Col. 895	Col. 896	Col. 897	Col. 898	Col. 899	Col. 900	Col. 901	Col. 902	Col. 903	Col. 904	Col. 905	Col. 906	Col. 907	Col. 908	Col. 909	Col. 910	Col. 911	Col. 912	Col. 913	Col. 914	Col. 915	Col. 916	Col. 917	Col. 918	Col. 919	Col. 920	Col. 921	Col. 922	Col. 923	Col. 924	Col. 925	Col. 926	Col. 927	Col. 928	Col. 929	Col. 930	Col. 931	Col. 932	Col. 933	Col. 934	Col. 935	Col. 936	Col. 937	Col. 938	Col. 939	Col. 940	Col. 941	Col. 942	Col. 943	Col. 944	Col. 945	Col. 946	Col. 947	Col. 948	Col. 949	Col. 950	Col. 951	Col. 952	Col. 953	Col. 954	Col. 955	Col. 956	Col. 957	Col. 958	Col. 959	Col. 960	Col. 961	Col. 962	Col. 963	Col. 964	Col. 965	Col. 966	Col. 967	Col. 968	Col. 969	Col. 970	Col. 971	Col. 972	Col. 973	Col. 974	Col. 975	Col. 976	Col. 977	Col. 978	Col. 979	Col. 980	Col. 981	Col. 982	Col. 983	Col. 984	Col. 985	Col. 986	Col. 987	Col. 988	Col. 989	Col. 990	Col. 991	Col. 992	Col. 993	Col. 994	Col. 995	Col. 996	Col. 997	Col. 998	Col. 999	Col. 1000
Col. 1	Col. 2	Col. 3	Col. 4	Col. 5	Col. 6	Col. 7	Col. 8	Col. 9	Col. 10	Col. 11	Col. 12	Col. 13	Col. 14	Col. 15	Col. 16	Col. 17	Col. 18	Col. 19	Col. 20	Col. 21	Col. 22	Col. 23	Col. 24	Col. 25	Col. 26	Col. 27	Col. 28	Col. 29	Col. 30	Col. 31	Col. 32	Col. 33	Col. 34	Col. 35	Col. 36	Col. 37	Col. 38	Col. 39	Col. 40	Col. 41	Col. 42	Col. 43	Col. 44	Col. 45	Col. 46	Col. 47	Col. 48	Col. 49	Col. 50	Col. 51	Col. 52	Col. 53	Col. 54	Col. 55	Col. 56	Col. 57	Col. 58	Col. 59	Col. 60	Col. 61	Col. 62	Col. 63	Col. 64	Col. 65	Col. 66	Col. 67	Col. 68	Col. 69	Col. 70	Col. 71	Col. 72	Col. 73	Col. 74	Col. 75	Col. 76	Col. 77	Col. 78	Col. 79	Col. 80	Col. 81	Col. 82	Col. 83	Col. 84	Col. 85	Col. 86	Col. 87	Col. 88	Col. 89	Col. 90	Col. 91	Col. 92	Col. 93	Col. 94	Col. 95	Col. 96	Col. 97	Col. 98	Col. 99	Col. 100	Col. 101	Col. 102	Col. 103	Col. 104	Col. 105	Col. 106	Col. 107	Col. 108	Col. 109	Col. 110	Col. 111	Col. 112	Col. 113	Col. 114	Col. 115	Col. 116	Col. 117	Col. 118	Col. 119	Col. 120	Col. 121	Col. 122	Col. 123	Col. 124	Col. 125	Col. 126	Col. 127	Col. 128	Col. 129	Col. 130	Col. 131	Col. 132	Col. 133	Col. 134	Col. 135	Col. 136	Col. 137	Col. 138	Col. 139	Col. 140	Col. 141	Col. 142	Col. 143	Col. 144	Col																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								



[illegible]

Total



## DIPHTHERIA

SCAR, EI + EVLR

	1	3	4	5	6	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526	527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547	548	549	550	551	552	553	554	555	556	557	558	559	560	561	562	563	564	565	566	567	568	569	570	571	572	573	574	575	576	577	578	579	580	581	582	583	584	585	586	587	588	589	590	591	592	593	594	595	596	597	598	599	600	601	602	603	604	605	606	607	608	609	610	611	612	613	614	615	616	617	618	619	620	621	622	623	624	625	626	627	628	629	630	631	632	633	634	635	636	637	638	639	640	641	642	643	644	645	646	647	648	649	650	651	652	653	654	655	656	657	658	659	660	661	662	663	664	665	666	667	668	669	670	671	672	673	674	675	676	677	678	679	680	681	682	683	684	685	686	687	688	689	690	691	692	693	694	695	696	697	698	699	700	701	702	703	704	705	706	707	708	709	710	711	712	713	714	715	716	717	718	719	720	721	722	723	724	725	726	727	728	729	730	731	732	733	734	735	736	737	738	739	740	741	742	743	744	745	746	747	748	749	750	751	752	753	754	755	756	757	758	759	760	761	762	763	764	765	766	767	768	769	770	771	772	773	774	775	776	777	778	779	780	781	782	783	784	785	786	787	788	789	790	791	792	793	794	795	796	797	798	799	800	801	802	803	804	805	806	807	808	809	810	811	812	813	814	815	816	817	818	819	820	821	822	823	824	825	826	827	828	829	830	831	832	833	834	835	836	837	838	839	840	841	842	843	844	845	846	847	848	849	850	851	852	853	854	855	856	857	858	859	860	861	862	863	864	865	866	867	868	869	870	871	872	873	874	875	876	877	878	879	880	881	882	883	884	885	886	887	888	889	890	891	892	893	894	895	896	897	898	899	900	901	902	903	904	905	906	907	908	909	910	911	912	913	914	915	916	917	918	919	920	921	922	923	924	925	926	927	928	929	930	931	932	933	934	935	936	937	938	939	940	941	942	943	944	945	946	947	948	949	950	951	952	953	954	955	956	957	958	959	960	961	962	963	964	965	966	967	968	969	970	971	972	973	974	975	976	977	978	979	980	981	982	983	984	985	986	987	988	989	990	991	992	993	994	995	996	997	998	999	1000
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## TYPHOID FEVER

1924	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
January			1								1						2
February									1								1
March				1													1
April																	
May									1	1							2
June																	
July										1							1
August								2		3							5
September																	
October												1	1				2
November																	
December																	
Total	1	1	2	1					2	4	1	1					10

## TUBERCULOSIS

1924	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
January	7	4	8	3	4	1	4	5	9	10	10	4	7	5	5	2	100
February	3	7	5	7	6	1	4	2	8		7	3	8	6	4	8	80
March	5	6	7	11	3	4	4		5	5	1	3	7	8	4	6	80
April	4	5	9	5	6	4	7	5	7	6	3	4	4	9	3	5	80
May	8	7	8	3	5	4	7	4	6	4	6	9	7	9	2	7	80
June	10	8	9	2	5	4	6	4	4	4	3	5	1	5	2	8	80
July	4	7	15	3	5	5	7	4	4	2	3	3	1	3	2	4	77
August	6	6	9	1	1	1	8	4	2	2	3	4	2	6	4	4	59
September	4	0	8	3	0	1	5	5	3	4	1	3	5	3	5	3	50
October	4	6	14	1	5	2	1	4	3	4	1	3	6	3	3	5	70
November	6	4	5		4	4	9	2	5	3	2	3	5	8		4	80
December	5	7	6	1	4	4	1	5	10	3	7	2	4	4	2	4	73
Total	66	70	103	41	54	34	60	45	68	46	52	46	55	60	26	50	900

## PNEUMONIA (BRONCHO)

1924	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
January	11	6	8	2	10	7	18	14	8	17	17	23	61	8	4	3	179
February	17	6	4	4	5	3	8	9	4	10	8	7	5	17	6	3	114
March	7	3	11		10	4	10	7	12	8	1	8	3	5	3	6	100
April	17	4	14	5	8	3	8	8	7	15	3	4	7	5	7	9	123
May	12	5	5	4	7	4	7	6	3	6	3	3	4	7	4	4	84
June	6	2	4	3	1	4	3	2	7	5	2	6	2	3	5	5	59
July	5		4		1	1	5		3	4		1	1	6	8		33
August	2	2	4	2	7	1	3	1	1	8				4	7	1	34
September	3	2	6	1	5	2	4	2	3	2	1		3	4	2		41
October	10	4	5		1	5	5	1	8	2	4	5	2	5	1	4	69
November	17	9	10	1	9	6	10	5	2	13	3	6	2	10		4	108
December	17	4	14	7	9	5	10	8		15	9	8	6	19	1	8	152
Total	124	62	88	29	73	45	90	63	64	111	46	74	49	105	48	58	1107

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	T	total
1	5	5	8	5	3	4	0	7	6	5	5	5	4	10	8	7	71	100
2	5	2	8					0	1	3		8	1	8	5	4	40	50
3	6	1	10		4	9		8	8	7	6	5	5	20	2	19	154	190
4	6	5	4	3		6	17	3	4	16	3	3	12	6	2	19	154	190
5		7	8	7	1	8	5	7	18	3	5	12	5	7	3	21	188	238
6		13	3	5	2	6	12	4	8	21	8	28	4	10	15	18	21	278
7		4	3	30		6	10	16	37	46	26	32	9	20	24	3	18	340
8		7	6	8	5	8	10	20	28	31	31	16	8	35	31	16	3	400
9		10	60	10	13	28	11		3	4	13	8	30	32	4	10	8	500
10		2	10			10	6	8	11	8	3	5	15	31	6	10	208	268
11		4	16	2		16	13	14	20	19	13	8	33	37	6	28	300	370
12		5	16	5	3	5	12	9	48	11		00	30	35	19	24	285	355
13	64	26	1	1	88	27	50	1	4	26	18	53	79	308	41	76	27	256

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	
1	1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
3					2	6			2	2	7	13		1	2	3	43
1	1	5	2	27	1	2	4	5	11	26	5	3	19	4	2		116
2	3	8	5	20	5	10	11	15	10	36	9	20	9	4	15		193
28	8	39	9	9	50	40	45	13	18	44	12	70	57	25	50		802
35	12	47	17	14	67	43	69	72	31	35	34	73	66	51	87		763
24	16	41	15	6	27	25	47	54	24	25	10	52	37	22	60		490
3	2	5	21				2	5	8	2	2		8	6	4	7	58
			4		1				1			1	2	1			10
				1				1	4	1							7
								1	5				1				10
1	1		1			1		1			1						7
						3	1		5	2			2	1			11
39	43	147	56	83	57	133	186	88	106	131	72	33	209	113	228		2725



## CHICKENPOX

1934	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
January	11	8	24	5	4	8	5	19	24	12	20	12	11	9	15	16	244
February	11	6	30	2	13	8	1	37	20	13	10	13	15	12	10	10	244
March	7	7	33	2	18	7	9	37	18	10	9	7	16	17	11	10	244
April	7	3	27	1	5	10	12	10	18	14	19	10	16	14	14	21	244
May	7	4	15	3	4	15	8	12	5	12	13	7	9	11	11	11	244
June	8	4	8	2	2	8	6	13	14	3	4	5	6	10	9	8	244
July	2	5				3	5	5	3								244
August	2				3	1		1									244
September	3		2		1		1										244
October		3	1	2		1	3	2	5	5	1	5	8				244
November	10	4	4			3	3	8	2	11	10	2	4	5	2	8	244
December	7	5	6			12	4	7	28	15	15			8	2	15	244
Total	75	42	157	16	52	74	62	152	170	16	24	97	113	104	110	115	1700

## MUMPS

1934	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
January	28	14	13	6	9	5	8	33	11	7	23	11	11	5	5	23	244
February	24	7	25	10	6	2	12	34	18	5	45	13	4	10	2	27	244
March	25	12	26	23	10	16	28	68	51	19	82	8	96	16	39	56	1744
April	24	16	17	15	5	22	30	65	64	19	99	9	50	1	39	69	1744
May	14	9	31	8	2	17	15	48	38	17	18	3	17	8	15	16	244
June	13	4	9	5	4	10	12	38	29	5	13	5	6	10	1	17	244
July	3	1	2	1				4	4	1	7	1	1				244
August	1				1												244
September	1	2	1		2		1			1	1						244
October		1			5	1	6	1	2	2							244
November			1	1					2	3							244
December	1			1	4						1	2					244
Total	131	66	136	72	48	84	111	291	221	74	24	50	38	26	133	237	1744

## PRYSL'S AS

1934	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
January	1	1	2		5	4	1	2	3		2	2	1				24
February	1	1	1	1	2	1			1	1	1	3	2	3		2	12
March			6	3	9	1		3	7	4		7	3	3	7	10	60
April	4	2	3	3	1			3				1	1	1	1	1	17
May		1	3		3	2	1	4				1	1	1		6	24
June	3			4	1	2		5				3				1	23
July	3																6
August			1		1			2	1								5
September		1	3		1	2	2	2				1		2			12
October							2		1						5	4	10
November					1	1	1				2	1		1			6
December				4	1	1	1		1	2			1	2	2	1	16
Total	17	7	12	12	18	18	23	25	13	7	19	7	24	18	19	19	244

	2	3	4	5	6	7	8	9	10	12	13	14	15	16	T	val
1	5	11	6	18	5	13	18	8	2	17	16	8	9	14	301	
2	14	5	9	4	4	4	4	14	5	14	16	6	9	182		
3	10	15	6	19	12	14	13	13	18	13	10	0	15	273		
4	8	28	17	21	12	13	11	9	10	11	8	8	16	216		
5	8	9	3	8	7	13	10	2	5	0	5	15	8	167		
6	8	10	1	8	2	5	15	0	9	5	6	6	1	104		
7	2	1	2	1	1	1	5	6	2	2	2	3	3	35		
8	2	5	2	4	1	4	1	2	2	1	2	1	1	27		
9	2	6	5	2	2	1	5	3	1	4	2	7	2	49		
10	3	8	4	6	1	1	6	18	3	5	1	14	3	1	72	
11	5	9	7	13	13	8	6	9	8	12	10	6	10	6	145	
12	7	24	13	8	6	9	7	13	8	16	6	22	6	10	167	
13	73	145	65	126	71	98	80	99	164	85	114	63	135	68	79	1596

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	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Totals
1																	1
2															1		2
3																	1
4											1						1
5																	1
6						1											2
7									1								2
8											1						1
9																	1
10																	1
11																	1
12																	1
13																	1
14																	1
15																	1
16																	1
Totals	1	1								1	1	2	1			2	12

## INFLUENZA

INFLUENZA																
1924	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Jan. army	4	2	10													
For. mar.	5	3	1													
March		1	4													
April	1		3													
May																
June		2	1													
July																
August																
September			1													
October																
November	3	2	7	1												
December	4		3	3												
Total	16	1	28	1	10	16	33	35	1	10	7	26	3	25		

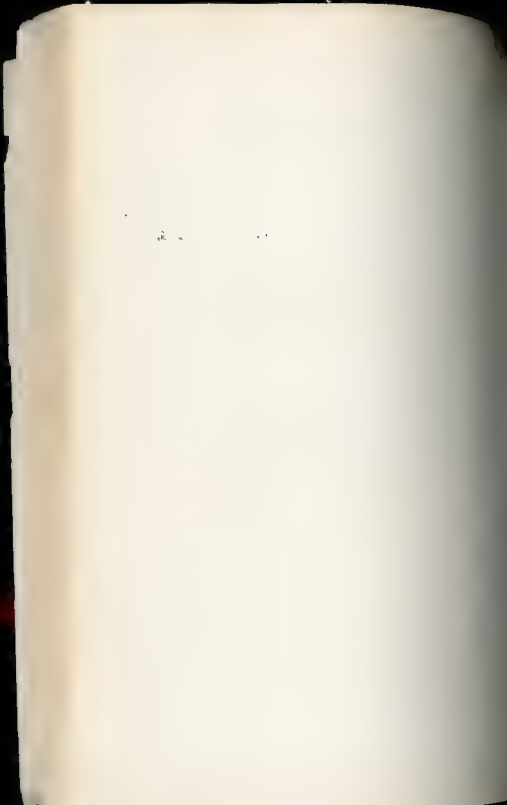
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ANNUAL REPORT

OF THE

**Food and Drug Division**



# ANNUAL REPORT

## OF THE

# Food and Drug Division

W. Craster, M.D., D.P.H., Health Officer.

DEPARTMENT OF HEALTH.—I herewith submit the report of the  
Food and Drug Division for the year ending December 31,

24

Respectfully,

SAMUEL G. SHARWELL,  
Chief Food and Drug Inspector.

### DAIRIES

Dairies supplying milk to Newark.....	44
Dairies re-inspected.....	195
Dairies are located within a radius of eight miles of the	
city. All have been tested by authorities of the State Depart-	
ment of Agriculture. The subcutaneous and ophthalmic tests have	
been made in every case.	
Authorized dairies inspected and scored.....	403
Of the 403 dairies scored, 391 scored the 65 points or more,	
4 scored below the required ordinance and 12 scored below the required	
grade. Of the dairies scoring below, 5 were placed in the grade	
of probation, 2 were rejected entirely, due to unsanitary reasons,	
and 5 were again found satisfactory after re-inspections.	
Unauthorized dairies not inspected or scored.....	309

## MILK EXAMINATIONS

Sealed chemical samples taken	91
Sealed chemical samples below legal standard	10
*Bacterial samples taken	2,998
Bacterial samples within the required count	2,541
Preliminary samples taken	1,800
Preliminary samples below legal standard	1,800
Temperature tests taken at creameries (both night and morning)	5,091
Sediment tests taken at creameries (40-quart cans)	2,745
Sediment tests taken at Food and Drug Laboratory	2,745
Sweet and sour cream samples obtained	2,998
Sweet and sour cream samples below standard	2

\*Of the 2,998 bacterial milk samples secured, forty-six were found to contain streptococci and pus. In each instance a notice was sent to the dairyman to employ the services of a licensed veterinarian to examine the entire herd of cattle to find the ones infected. The notice we compel the dairyman to return within ten days of receipt of same, properly signed by the doctor. In no case is the milk from the isolated cows permitted to be used. The dairy is closely guarded until the veterinarian submits his report informing us that the cows are free from infection.

There are forty-four creameries and receiving stations shipping milk into Newark. Of the 2,745 sediment milk samples taken, 2,541 were clean, 18 were fairly clean, 15 were dirty, 18 were very dirty and 20 were filthy. The sediments that were not clean or fairly clean, the milk was barred from entering the city.

There were 5,091 quarts of grades "A" and "B" milk excluded, due to not being clean, and not being properly cooled as required. The "A" milk to be cooled to a temperature of 50 degrees Fahrenheit or lower, and the "B" to be cooled to 60 degrees or lower when delivered to the creamery. (This applied to both night and morning's milk.)

## DISTRIBUTION OF MILK

As you will note in the milk examination table that there were 2,998 bacterial samples taken, this total comprising

1 pint and quart bottles, 1,494 quarts were distributed to the needy in Newark. Nurses investigating, placed in the head of the house an identification card to obtain the product.

1,000 milk samples were collected from dealers serving the city, in all 175. When the sample is first obtained, it is delivered to our laboratory where an ounce is removed for bacterial count, then an eight-ounce bottle is returned for chemical analysis and the balance given to the dealer as herein stated.

## MILK BACTERIAL COUNTS

The following allowance allows the following bacterial count, per centimeter, for the various grades of milk:

1. Sterilized	10,000	Maximum Count,
2. Pasteurized	1,000	"
3. Pasteurized	100	"
4. Pasteurized	20,000	"

## ICE CREAM SAMPLES

There was a law passed by the State regarding an ice cream standard. This law was passed on February 20, 1922 reading as follows:

"There must be eight per centum of milk fats, contained therein, except when the ingredients include fruit, nuts or other ingredients in which case it shall contain not less than six per centum of milk fats."

The following amount of samples were obtained during the year 1924, and the analyses are as follows:

- 1. Cream samples analyzed (83 manufacturers)
- 2. Samples averaged above 8% milk fat
- 3. Samples averaged below 8% milk fat

1. Cream samples analyzed	272%
2. Samples averaged above 8% milk fat	1860%



SAMPLES OF FOOD TAKEN IN CONJUNCTION WITH  
STATE INSPECTORS

Soda water	1
Cream	1
Milk	1
Cider	1
Butter	1
Meats	1
Syrup	1
Olive Oil	1
Total	8

MISCELLANEOUS FOOD SAMPLES TAKEN BY  
INSPECTORS OF THE DEPARTMENT

Cider	14
Meats	14
Olive Oil	3
Soda Water	33
Oysters	7
Milk	19
Butter	8
Syrup	1
Cream	1
Canned sausage and sauerkraut	1
Canned food products	2
Total	154

## FOODSTUFFS CONDEMNED

Herewith is a list of foodstuffs condemned as being unfit for consumption:

## POULTRY AND SEA FOOD

168 cans sardines	40 cans salmon
2 chickens	90 lbs. assorted fish
49 packages boneless codfish	
27 cans tuna fish	

## OTHER FOOD PRODUCTS

	800 tomato paste
	118 cans sausage and sauer- kraut
	1 crate tomatoes
	46 barrels chestnuts
	21 cans olives
	2 boxes cherries
	42 boxes strawberries
	45 cans soups
	25 lbs. meats
	124 468 lbs grapes
	139 cans cream
	5,491 quarts milk
Apples	
Oranges	
Pears	
Peaches	
Plums	
Raspberries	
Strawberries	
Blackberries	
Cherries	
Chestnuts	
Cucumbers	
Olives	
Peas	
Peppers	
Potatoes	
Sauerkraut	
Sausage	
Tomatoes	
Tomato paste	

SUMMONALS TO ATTEND FOOD AND DRUG  
HEARINGS

Summons issued and re-issued	116
Summons issued but failed to put in their appearance	7
Letters sent in all cases	7
Summons issued	35
Restaurant and mineral water proprietors, grocers, con- fectioners and druggists summoned to appear regarding the State Sanitary Act and Sanitary Code	49
Summons issued to attend the hearings so legal proceedings could be had	9
Summons issued to revoke license to serve milk, due to violation of ordinance and failure to attend the hear- ings	9
Summons issued to dealers in business during 1924, were 175, of this total continued of their own accord	175
Total attending hearings	188

## COURT CASES

Cost to the Legal Department	115
Cost of court (plus cost of court)	5
Cost of payment of court cost (\$185)	104
Cost of cases not served (violators out of business)	6

### SAMPLES OF FOOD TAKEN IN CONJUNCTION WITH STATE INSPECTORS

Soda water	
Cream	
Milk	
Cider	
Butter	
Meats	
Syrup	
Olive Oil	
Total	

### MISCELLANEOUS FOOD SAMPLES TAKEN BY INSPECTORS OF THE DEPARTMENT

Cider	
Meats	
Olive Oil	
Soda Water	
Oysters	
Milk	
Butter	
Syrup	
Cream	
Canned sausage and sauerkraut	
Canned food products	
Total	

### FOODSTUFFS CONDEMNED

Herewith is a list of foodstuffs condemned as being unfit for consumption:

### POULTRY AND SEA FOOD

168 cans sardines	40 cans salmon
2 chickens	90 lbs. assorted fish
45 packages boneless codfish	
27 cans tuna fish	

## OTHER FOOD PRODUCTS

800 tomato paste	
118 cans sausage and sauerkraut	
1 crate tomatoes	
46 barrels chestnuts	
21 cans olives	
2 boxes cherries	
42 boxes strawberries	
45 cans soups	
25 lbs. meats	
124,468 lbs grapes	
139 cans cream	
5,491 quarts milk	
3000 pretzels	
3000 soups	
3000 pumpkins	
3000 eggs	
3000 baskets peppers	
3000 cucumbers	
3000 blackberries	
3000 lard	
3000 bottles soda water	
3000 cakes	
3000 peaches	
3000 rods	
3000 potatoes	
3000 candy	

## PERSONS SUMMONED TO ATTEND FOOD AND DRUG HEARINGS

Milk dealers summoned and re-summoned	110
Milk dealers summoned but failed to put in their appearance	
Registered letters sent in all cases	9
Food exposure violators appeared	35
Restaurant and mineral water proprietors, grocers, confectioners and druggists summoned to appear regarding enforcement of the State Sanitary Act and Sanitary Code	49
Of this total 6 failed to attend the hearings so legal proceedings were instituted	
Of this total 3 had their license revoked to serve milk, due to violation of our ordinance and failure to attend the hearing (all later rescinded)	9
Of this total 174 milk dealers in business during 1924, of this total 21 were summoned of their own accord	

Total attending hearings... 186

## COURT CASES

Cases sent to the Legal Department	115
Dismissed (plus cost of court)	7
Cases discontinued on payment of court cost (\$1.85)	104
Summons not served (violators out of business)	0

A violator was fined for selling milk which was not contained in bottles, an offender had to pay the penalty for offering for sale decomposed foodstuffs; 1 violator was fined for selling milk in a store below the legal standard and 2 storekeepers were fined for selling milk without first obtaining a license.

## MILK AND CREAM LICENSES

Store licenses issued 1,737 - - - - -	\$3,474.00
Wagon licenses issued (consisting of 175 dealers) - - - - -	868.00
Dealers handling more than one grade of milk (fee of 50 cents is charged for each additional grade of milk handled; 12c - - - - -)	60.00
Cream licenses issued to stores and wagons - - - - -	374.00
Total - - - - -	\$4,776.00

FINES PAID FOR SAMPLES OF MILK BELOW THE  
LEGAL STANDARD

Milk samples - - - - -	\$1,980.00
------------------------	------------

## FOODSTUFFS IN CITY INSTITUTIONS INSPECTED

Occasional inspections were made of the foodstuffs in our institutions

Alms House, Ivy Hill, New Jersey  
Boys' Home, Verona, New Jersey  
City Hospital

As a whole the foodstuffs inspected were fit for consumption

## MEDICAL PREPARATIONS

There were twenty two persons made application to offer for sale medical preparations prepared by themselves or firms out West. In each instance forms had to be filled out by the applicant and sworn to before a notary, informing us what the preparation contains (this information is

kept confidential, before we would consider giving our approval a sample of the remedy as well as a copy of the label to be used is also required

Our bacteriologist, chemist and authorities of the United States Department of Agriculture analyze the article, should we desire before giving our consent to obtain a license for the same

Inspections made of the different establishments where food is prepared and sold for the purpose of enforcing the State law and sections of the Sanitary Code:

Meat stores inspected for milk licenses and sanitation	1,840
Meat stores inspected and scored	715
Meat stores re-inspected	2,964
Meat certificates issued (scored 80% or over as to sanitation and equipment used)	89
Milk pasteurizing plants inspected	9
Milk pasteurizing plants re-inspected	149
Milk stores inspected	603
Milk stores inspected (with State inspector)	8
Milk establishments inspected	98
Milk establishments re-inspected	396
Milk shops inspected	47
Milk shops re-inspected	341
Milk re-inspected	721
Market inspections and re-inspections	832
Soft water plants inspected	32
Soft water plants re-inspected (81 with State inspector)	247
Soft water plants inspected	11
Wholesale grocery plants inspected	14
Wholesale pretzel bakeries	5
Baking plants inspected	5
Baking plants re-inspected	21
Wholesale shops inspected and re-inspected	381
Dairy stores inspected	372
Dairy stores re-inspected	847
Dairy establishments inspected and re-inspected	83
Soft water fountain inspections	879

Soda water fountain re inspections	
Lemon ice plants inspected	254
Plants used for bottling milk inspected	2
Drug stores inspected	1
Drug stores re inspected	254
Smoked fish plants inspected	112
Chewing gum factories inspected and re inspected	
Food exposures investigated	
Stand holders in Dreamland Park inspected and re inspected	34
Total inspections	1459

ESTABLISHMENTS FOUND O. K. AFTER INSPECTIONS  
WERE MADE AND NOTICES SERVED

Grocery stores	174
Restaurants	65
Milk pasteurizing plants	1
Confectionery stores	52
Pickle plants	
Ice cream establishments	5
Butcher shops	4
Bakeries	20
Centre Market	14
Soda water plants	2
Cheese plants	1
Wholesale grocery plants	2
Wholesale pretzel bakeries	1
Egg candling plants inspected	4
Macaroni shops	25
Delicatessen stores	24
Sea food establishments	2
Soda water fountains	3
Lemon ice plants	12
Milk bottling plants	4
Drug stores	174
Smoked fish plants	1
Chewing gum factories	1
Stand holders in Dreamland Park	34
Food exposures (vegetable, grocery and confectionery stores)	77
Total	457

OTHER NOTICES SERVED TO COMPLY WITH  
VARIOUS LAWS

Notices sent restaurants regarding the wrapping of silverware	715
Notices sent to retail dealers informing them to notify the department about six places they serve milk in the city of New York daily and at what hours of the day.....	178
Notices sent dairymen regarding sediment and temperature of milk at creameries.....	3,502
Notices served to grade "A" raw lakes (tuberculin testing of milk bottle caps, sanitation, etc.).....	307
Department sent notices regarding the cooling of milk (grades of milk dairies).....	3,502
Food handler notices served.....	8,665
Notices sent violators to attend Food and Drug hearings.....	194
Total.....	17,160

## FOOD HANDLER EXAMINATIONS

Under authority contained in the State Sanitary Code, regulation 37, we compel food handlers employed in restaurants to be physically examined in this Department semi-annually, except where the establishments conducting restaurants have physicians and a dispensary for the proper holding of clinics.

Soldiers, dispensers, bakers, confectioners, dairymen, etc., (excluding restaurants) we require to be physically examined annually. These persons have the preference to be examined in our department or by their family physician. In this instance we follow our ordinance adopted, October 10, 1918.

The examination includes a chest examination and nose and throat culture. A Wassermann test is made, if there is any suspicion of the person having a venereal disease.

Certificates of health are issued to all persons passing the tests, and the same must be kept in their possession at all times. Food handlers not receiving certificates are noti-



fied to discontinue their services in establishments where foodstuffs are prepared or sold, within 24 hours of receipt of the notice sent.

Food handlers physically examined for the first and second halves of the year are as follows.

## RESTAURANTS

	1st Half	2nd Half	Total
Employees granted certificates...	2,452	3,244	5,696
Of the 5,726 persons granted certificates, the following were examined at cities where employed			
Males examined	197	240	437
Females examined	1,568	2,033	3,601
White	904	1,231	2,135
Colored	2,147	2,772	4,919
Chinese	282	393	675
Japanese	63	79	142
Positive cases of tuberculous and venereal diseases	10	20	30

NOTE: Nine restaurant proprietors were turned in the suitcases having their employees physically examined within a specified time. All cases were discontinued on payment of cost of code showing to the persons being examined before the case was tried as it was their first offense.

GROCERS CONFECTIONERS SODA DISPENSERS,  
DAIRYMEN, BAKERS ICE CREAM VENDORS ETC.

Persons granted certificates	286
(Of this total 797 were examined by their own physicians)	
Females examined	40
Males examined	246
White	20
Colored	4

NOTE: There were 8,695 food handler certificates granted during the entire year 1924.

RESULT OF MILK SAMPLES ANALYZED  
(SPECIAL SAMPLES NOT COUNTED IN THIS TABLE)

## BACTERIAL ANALYSIS

	Total No. Bacterial Samples taken	Average Bacterial Count	Bacterial Samples Above Standard	No. of Dealers
Grade	104	27,556	8	4
Ungraded	1,083	20,876	70	28
A Raw	490	20,876	70	28
A Pasteurized	1,164	46,749	209	88
B Pasteurized				

## CHEMICAL ANALYSIS

	Total No. Chemical Samples taken	Average Fat Content	Average Total Solids	No. of Sources
Grade	48	3.90	12.68	6
Ungraded	535	3.43	11.98	38
A Raw	247	3.54	12.06	12
A Pasteurized	568	3.53	12.07	25
B Pasteurized				

## SAMPLES TAKEN IN 1924

DEALER	PRODUCER	Severed Samples Taken	Practical Samples Above Standard	Average Ba. Germ Count per Year	Chemical	Fats	Protein
CERTIFIED SAMPLES							
Pat. field Dairy Co.	Own	24	0	1,787			
Newark M. & L. Co.	Walker-Gordon Co.	16	0	2,541	0	3.33	1.1
Borden F. P. Co.	Guthrie, N. Y.	20	2	5,970	3	3.51	1.1
Borden F. P. Co.	Earlville, N. Y.	20	1	24,685	10	3.19	1.1
Woodstock Farms	Own	20	4	5,280	0	4.34	1.1
Borden, F. P. Co.	W. Low Point, N. Y.	4	1	77,075	2	3.46	1.1

## A—RAW SAMPLES

DeLan, Patrick	Own	4	0	3,500	2	3.35	1.1
Kerr, Philip	Goble, Farms	16	0	6,125	8	3.58	1.1
Baker & Fox	Own	16	0	9,158	8	4.01	1.1
Crump, James	Thompson, Es	4	0	4,500	2	3.55	1.1
Wolf, W. J.	Own	0	0	12,884	5	3.25	1.1
Martens, John A.	Own	4	1	12,500	0	3.65	1.1
Baker, Bernard	Le. & Borsky	16	1	14,100	6	4.54	1.1
Go Daeg, Harry	Own	12	1	18,216	7	4.84	1.1
Heide, John	Own	16	1	15,000	8	4.92	1.1
Bent, Cassio	H. & L. Kram	16	6	9,690	6	4.04	1.1
Rust, Theodore	Own	8	0	20,874	4	4.4	1.1
Moran, Edward	Lucas, Farm	16	0	21,875	8	5.40	1.1
Heide, Leonard	Own	16	0	22,750	0	3.75	1.1
Bonitas, Wm.	David R. Gense	12	0	1,083	0	3.58	1.1
Capron, W.	Charles A. S. Gense	1	0	25,000	0		
Hanley, Max	Frank P. Gense	8	0	8,000	4	3.49	1.1
Brown, Sam	Sam. S. Gense	4	0	16,000	2	3.17	1.1
J. & L. B.	Sam. S. Gense	1	0	2,000	0	2.90	1.1
Chapman, B.	Nathan Drake	4	0	10,511	2	3.80	1.1
Green, J. T.	Lucas Borsky	5	0	31,210	4	3.1	1.1
Wehrmann, C.	Lucas Borsky	16	0	4,788	8	3.65	1.1
Wehrmann, M.	Own	10	0	32,750	1	4.5	1.1
Chapman, B.	Pure Milk Farms	0	0	54,888	11	3.82	1.1
Udo, Edward	Pure Milk Farms	16	0	35,000	8	3.44	1.1
S. & L. Jacob	Own	4	0	40,250	2	3.0	1.1
Totter, M.	Nathan Drake	14	0	30,617	7	3.5	1.1
Moore, Philip	Nathan Drake	16	0	3,431	8	4.89	1.1
Rosenburg, M.	Le. & Borsky	1	1	39,000	4	3.74	1.1
Horton, Frank	Pure Milk Farms	8	1	28,000	4	3.6	1.1
Poe, George	Own	4	0	40,000	2	3.68	1.1
Zanderman, R.	Nathan Drake	1	0	4,000	6	3.63	1.1
K. & E. End	Own	16	1	41,817	7	3.58	1.1
Jack & Revon	Lucas Borsky	4	0	42,750	7	3.95	1.1
Hoffman, J. P.	David R. Gense	4	0	44,000	8	3.63	1.1

## A—RAW SAMPLES—Continued

DEALER	PRODUCER	Bacterial Samples Taken	Bacterial Samples Above Standard	Average Bacterial Count for Year	Chemicals	Pets	Total Score
	David Rudisart	16	1	43,312	8	3.63	12.42
	Isaac Dvornik	6	0	43,333	4	3.47	12.07
	Nathan Drake	4	0	45,000	2	3.50	12.07
	Frank Ferns Estate	8	0	45,250	4	3.38	11.70
	Own	16	1	47,377	8	3.48	11.95
	Own	20	1	49,950	9	3.06	12.63
	Sam Shoenkman	4	0	50,000	1	3.00	11.65
	Pure Milk Farms	9	1	52,885	4	3.34	11.66
	Own	16	3	53,311	8	3.00	12.66
	Own	12	2	53,500	6	3.16	11.65
	H. Acadman	4	0	45,000	2	3.50	12.37
	Own	4	0	53,750	2	3.60	11.18
	Own	16	2	54,500	8	3.03	12.56
	Philip Ferns Est.	24	3	55,666	12	3.51	12.17
	Pure Milk Farms	16	9	55,625	8	3.33	11.89
	Own	16	2	55,812	8	3.33	12.28
	Marcus Levine	20	1	56,750	10	3.27	11.70
	Philip Ferns Est.	16	0	56,750	6	3.23	11.90
	Sam Shoenkman	8	0	57,500	4	3.50	12.13
	Own	8	0	58,750	4	3.28	11.96
	Louis Borinsky	8	1	62,625	4	3.75	11.36
	Philip Ferns Est.	16	2	62,850	7	3.40	12.12
	Philip Ferns Est.	10	1	65,500	5	3.32	11.80
	Own	8	1	65,625	4	3.48	12.00
	Own	2	2	66,666	6	3.29	12.35
	Pure Milk Farms	10	0	68,000	10	3.50	11.88
	Steinberg & Henkel	12	2	73,333	6	3.50	11.30
	Own	16	3	75,500	8	3.48	12.61
	Own	12	3	76,666	6	3.49	12.53
	Philip Ferns Est.	16	3	77,280	8	3.11	11.60
	Sam Shoenkman	6	1	77,500	4	3.20	11.23
	Louis Borinsky	7	0	78,571	4	3.32	12.15
	Pure Milk Farms	12	3	82,083	5	3.58	12.17
	Pure Milk Farms	8	2	82,800	3	3.40	12.05
	Own	24	5	83,541	11	3.77	12.31
	Louis Borinsky	16	5	84,250	8	3.48	11.16
	Philip Ferns Est.	4	1	86,000	2	3.43	11.20
	Philip Ferns Est.	4	1	86,750	2	3.35	12.22
	Philip Ferns Est.	17	4	90,647	8	3.31	11.56
	Own	16	2	92,432	8	3.76	12.35
	Pure Milk Farms	8	2	92,500	4	3.50	11.41
	Louis Borinsky	12	4	95,000	6	3.13	11.81
	Pure Milk Farms	12	2	96,666	6	3.34	11.85
	Louis Borinsky	4	1	98,250	2	3.00	12.60
	Frank D. ...	4	1	100,000	2	3.48	12.14

## A—RAW SAMPLES—Continued

DEALER	PRODUCER	Bacterial Samples Taken	Bacterial Samples Above Standard	Average Bacterial Count for Year	Chemicals	Fats	Water Soluble
Hoffman, W. & Co.	Dan of Rudasor	4	2	100,000	2	1.00	12.00
Fen Joseph	Marcus Levine	8	2	106,250	4	2.05	12.50
Keen Harry	Philip Fems Estate	4	2	117,500	2	2.18	12.50
Seddon Charles	Own	20	7	114,500	10	3.48	12.50
Treusch, C.	Louis Bornsday	16	5	115,000	8	3.66	12.50
Baumann, H.	Philip Fems Estate	4	2	117,500	2	3.61	12.50
Keen Harry	Louis Bornsday	12	3	118,750	6	3.33	12.50
Poletti Charles	Charles Seddon	4	2	127,500	2	3.80	12.50
Spencer Harry	Philip Fems Est.	4	2	130,000	2	3.50	12.50
Shattuck M.	Own	16	7	140,000	7	3.38	12.50
Young, Edward	Moschitz Bros	8	2	154,375	4	3.76	12.50
Packerman, Jacob	Sam Shenzman	6	2	155,000	4	3.40	12.50
Foley, Wm.	Philip Fems Estate	8	2	163,125	4	3.42	12.50
Kopan Meyer	Marcus Levine	16	8	165,412	8	3.02	12.50
Stock, William	Marcus Levine	16	6	165,563	8	3.09	12.50
Pasavitz, H.	Sam Shenzman	20	6	182,000	8	3.05	12.50
Colvash A.	Sam Shenzman	15	8	214,800	7	3.14	12.50
Cohen Jacob	H. Aedkman	4	2	217,250	2	3.25	12.50
Krebs, Charles	Louis Bornsday	12	8	294,083	5	3.54	12.50
Oransky, Max	Louis Bornsday	4	2	561,250	2	3.20	12.50

## A PASTEURIZED SAMPLES

D. Maso, G.	Dairymen's League, Inc.	1	0	1,000	1	3.60	12.00
Picco, George	Dairymen's League, Inc.	4	0	1,250	2	3.85	12.00
Greenkalf H.	Model Dairy Co.	4	0	1,500	2	3.25	12.00
La Para Frank	Dairymen's League, Inc.	8	0	1,625	4	3.84	12.00
Stahl, George	Dairymen's League Inc	4	0	1,750	2	3.78	12.00
Dairymen's League Inc Own	Own	4	0	2,300	2	3.51	12.00
Montagna, A.	Dairymen's League, Inc.	4	0	2,000	2	4.05	12.00
Borden, F. P. Co.	Borden N. Y.	20	0	2,350	10	3.46	12.00
Goldman, H.	Dairymen's League, Inc.	4	0	2,370	1	4.20	12.00
Burder F. P. Co.	Florida, N. Y.	20	0	2,950	10	3.37	12.00
Bornberg Philip	Model Dairy Co.	1	0	3,000	1	3.40	12.00
Burger, Fred	Wm. Frost, Inc.	4	0	3,000	2	3.50	12.00
Dairymen's League	Kortwright, N. Y.	16	0	3,312	8	3.74	12.00
Bruchman, Adolph	Model Dairy Co.	12	0	3,500	6	3.64	12.00
Hellrock, C.	Model Dairy Co.	80	0	3,875	4	3.41	12.00
Mandel Harold	Dairymen's League, Inc.	4	0	4,250	2	3.85	12.00
Larney Patrick	Dairymen's League, Inc.	4	0	4,250	2	3.90	12.00
Burgess, Frank	Model Dairy Co.	4	0	4,250	2	3.48	12.00
Fairless Dairy Co.	Own	24	0	4,250	11	3.58	12.00
Clinton Milk Co.	Model Dairy Co.	8	1	4,750	4	3.59	12.00
Cravens, I.	Model Dairy Co.	16	0	4,875	8	3.45	12.00
Woodbrook Farms	Own	20	1	6,150	9	3.68	12.00

## A--PASTEURIZED SAMPLES--Continued

DEALER	PRODUCER	Bacterial Samples Taken	Bacterial Samples Above standard	Average Bacterial Count per Year	Chemicals	Fats	Total Solids
Wells-K	Model Dairy Co	4	0	6 500	7	3 55	12 37
Wells-K	Model Dairy Co	8	0	6 500	4	3 53	11 96
Wells-K	Model Dairy Co	16	1	6 562	8	3 35	11 78
Wells-K	Model Dairy Co	4	0	4 250	2	3 80	7 50
Wells-K	Model Dairy Co	24	1	4 458	12	3 46	11 98
Wells-K	Model Dairy Co	4	1	8 500	2	3 40	11 98
Wells-K	Dairymen's League	12	1	9 416	6	3 68	12 18
Wells-K	Own	1	1	9 485	9	3 88	12 42
Wells-K	Model Dairy Co	16	1	10 187	8	3 47	12 09
Wells-K	Joseph Wol	8	1	12 900	4	3 26	11 82
Wells-K	Own	20	1	12 100	9	3 56	11 75
Wells-K	Model Dairy Co	8	1	13 125	4	3 71	12 19
Wells-K	Own	8	0	15 000	8	3 59	12 12
Wells-K	Fairbank Dairy Co	8	1	27 500	3	3 45	11 72
Wells-K	William Provost, Inc	4	1	27 750	2	3 40	11 83
Wells-K	Model Dairy Co	1	0	3 000	1	3 90	11 20
Wells-K	W. P. Janssen D Co	16	1	45,312	8	3 41	11 77
Wells-K	P. W. Janssen Co	16	6	49,812	8	3 40	11 84
Wells-K	Wm. Provost, Inc	16	8	5 312	7	3 44	11 85
Wells-K	Isaac Dvorin	9	6	57 000	5	3 79	11 82
Wells-K	P. W. Janssen D Co	20	10	66,400	9	3 52	11 96
Wells-K	Woodbrook Farms	13	5	70 500	6	3 43	11 86
Wells-K	P. W. Janssen D Co	12	6	77 583	6	3 48	11 98
Wells-K	P. W. Janssen D Co	13	8	87,538	7	3 45	11 88
Wells-K	Wm. Provost, Inc	1	1	87 571	4	3 72	11 10
Wells-K	Wm. Provost, Inc	16	4	100 125	8	3 49	11 78

## B--PASTEURIZED SAMPLES

Wells-K	Dairymen's League, Inc	8	0	4 875	4	3 68	12 31
Wells-K	E. Elman	8	0	5 250	4	3 53	11 94
Wells-K	Dairymen's League, Inc	4	0	7 000	2	3 40	11 80
Wells-K	Canton M. L. Co	2	0	8 000	2	3 43	11 76
Wells-K	Dairymen's League, Inc	16	0	8 250	8	3 29	12 19
Wells-K	Clinton M. L. Co	16	0	9 675	8	3 41	11 87
Wells-K	Own	16	0	10 437	8	3 43	12 12
Wells-K	C. W. Vanatta	6	0	10 500	4	3 41	11 84
Wells-K	E. C. Wyckoff	4	0	10 500	2	3 45	11 94
Wells-K	C. W. Vanatta	4	0	12,750	2	3 60	12 08
Wells-K	Supreme M. & C Co	8	0	14,250	4	3 54	12 34
Wells-K	Dairymen's League, Inc	24	1	14,450	10	3 76	12 37
Wells-K	Waterville, N. Y.	20	1	14 700	10	3 47	11 98
Wells-K	Dairymen's League, Inc	4	0	14 750	2	3 98	12 61
Wells-K	Dairymen's League, Inc	3	0	15 666	2	3 95	12 30
Wells-K	Dairymen's League, Inc	16	1	16,250	8	3 56	12 35

## B—PASTEURIZED SAMPLES—Continued

DEALER	PRODUCER	Bacterial Samples Taken	Bacterial Samples Above Standard	Average Bacteria Count for Year	Chemical	Path	Total Bacteria
Beardley, W.	Jersey Milk & Cream Co.	6	2	16,437	8	272	12.2
Evans, P.	C. W. Vanatta	16	1	18,062	7	251	11
Duchin, Samuel	C. W. Vanatta	1	0	18,428	4	255	12.08
Newark Milk Co.	Bordentown, N.	4	0	18,730	2	356	12
Greene, J. S.	C. W. Vanatta	4	0	20,532	2	350	12.11
Hess, F. J.	C. W. Vanatta	8	0	22,251	4	445	11.89
Dowling, Joseph	C. W. Vanatta	19	2	22,750	8	335	11.78
Gary, John	C. W. Vanatta	2	2	24,000	6	338	11.66
Coast, Aaron	C. W. Vanatta	20	2	24,130	13	343	11.61
Newark Milk & Cream Co.	C. W. Vanatta	20	2	24,465	2	339	11.59
Turoff, Abram	J. J. M. & C. Co.	0	0	25,000	1	351	12.10
Kasak, George	L. C. Weckhoff	6	3	25,250	8	340	11.80
Seelig, Charles	F. W. Janssen D. Co.	16	2	25,375	8	346	11.81
Newark Milk & Cream Co.	Bordentown, N. Y.	12	2	25,984	8	363	12.14
Provost, A. J.	Own	24	2	26,041	8	355	11.8
Crast, J. J.	J. J. M. & C. Co.	16	3	26,062	8	352	11.81
Holbrook, C.	C. W. Vanatta	4	1	26,500	8	338	11.78
Talbot, J. H.	L. C. Weckhoff	16	2	27,362	7	357	12.00
K. J. J. J. J.	B. R. Waldron & Son	12	2	27,750	6	343	11.66
L. J. J. J.	Dairyman's League, Inc.	6	1	28,000	4	356	12.10
C. W. Vanatta	C. W. Vanatta	20	5	28,800	6	344	11.78
Rose, Nathan	B. R. Waldron & Son	4	0	30,150	7	365	12.00
Lat. & Milk Co.	L. J. J. J.	16	2	30,947	8	357	11.78
Max, A. J.	F. W. Janssen D. Co.	24	6	31,750	11	348	11.66
Seelig, E. J.	N. J. M. & C. Co.	16	4	32,125	8	349	11.78
Simon, Samuel	C. W. Vanatta	12	2	33,426	6	343	11.66
Schroeder, E.	L. C. Weckhoff	24	4	33,675	12	345	11.60
Naroden, Sam.	N. J. M. & C. Co.	12	3	33,916	6	353	11.8
M. J. J. J.	C. W. Vanatta	16	2	35,750	8	339	11.66
Newark Milk Co.	Columbia, N. Y.	4	1	36,250	8	340	11.78
Kaplan, Jacob	C. W. Vanatta	16	2	36,562	6	348	11.66
Dairyman's League, L.	Own	24	2	36,911	11	358	12.00
Greenberg, Abe	N. J. M. & C. Co.	16	3	37,625	8	351	11.78
Kappas, Paul	J. J. M. & C. Co.	8	1	39,500	4	362	12.1
Var Nene, Burton	N. J. M. & C. Co.	4	2	40,000	2	358	12.1
Paskowitz, Sam	C. W. Vanatta	16	3	40,750	8	349	11.66
Rose, Nathan	Supreme M. & C. Co.	4	1	41,250	7	350	11.78
Parker, Geo.	Dairyman's League, Inc.	20	3	41,400	10	358	11.8
Goldberg, Harry	N. J. M. & C. Co.	16	4	44,437	8	352	11.8
Larney, P.	Dairyman's League, Inc.	16	4	44,750	8	352	11.8
Lerner, Charles	C. W. Vanatta	8	2	45,375	4	353	11.78
Kerner, Charles	C. W. Vanatta	12	3	45,500	5	348	11.66
Pratt, A.	N. J. M. & C. Co.	12	4	46,956	6	329	11.60
Zimmerman, R.	N. J. M. & C. Co.	24	4	47,728	11	354	11.8

## E--PASTEURIZED SAMPLES--Continued

DEALER	PRODUCER	Bacterial Samples Taken	Bacterial Samples Above Standard	Average Bacteria Count for Year	Chemical	Fats	Total Solids
	N. J. M. & C. Co.	13	4	49 076	7	3.40	11.64
	C. W. Vannt a	8	1	49 625	4	3.41	11.82
	C. W. Vannt a	16	3	51 687	8	3.45	11.99
	N. J. M. & C. Co.	12	3	50 916	9	3.44	11.88
	C. W. Vannt a	16	6	51 333	7	3.48	11.63
	N. J. M. & C. Co.	16	6	52 457	8	3.45	11.71
	Ingersoll M. & C. Co.	16	7	52 866	8	3.67	12.15
	B. R. Waldron & Co.	4	2	53 800	2	3.42	11.55
	Montruse, Phila.	20	3	55 150	1	3.43	11.92
	N. J. M. & C. Co.	16	4	57 875	8	3.47	11.8
	Whittemore, N. J.	24	2	64 416	11	3.46	11.78
	N. J. M. & C. Co.	16	6	61 872	8	3.48	11.59
	Dairymen's League, Inc.	16	2	65 937	8	3.5	12.31
	Over	24	10	66 041	12	3.58	12.12
	N. J. M. & C. Co.	16	6	66 500	7	3.5	12.65
	Dairymen's League, Inc.	16	2	67 312	8	3.65	12.27
	N. J. M. & C. Co.	16	6	69 862	11	3.44	11.45
	Lemon, Pa.	4	8	72 185	7	3.56	12.1
	Dairymen's League, Inc.	16	1	74 811	8	3.44	12.18
	N. J. M. & C. Co.	8	5	81 250	4	3.2	11.67
	E. C. Wyckoff	4	1	85 750	2	3.5	11.93
	Dairymen's League, Inc.	16	3	94 937	8	3.77	12.19
	C. W. Vannt a	4	1	103 000	2	3.33	11.50
	E. C. Wyckoff	16	7	115 18	8	3.41	11.81
	George Clark	16	4	124 187	8	3.44	11.73
	Clinton Milk Co.	20	3	129 450	10	3.45	11.82
	Dairymen's League, Inc.	4	3	194 250	2	3.43	11.40
	Oswego, N. Y.	20	1	240 750	10	3.51	12.03
	Clinton Milk Co.	16	4	255 000	8	3.45	11.96

\* This is milk average below standard 3% fat and 11.50% total solids  
 \*\* As determined by this department for all grades except certified, which must be  
 3.4% fat and 11.50% total solids on the cup



**BUREAU OF VETERINARY MEAT INSPECTION**

*Dr. Charles V. Craster, Health Officer.*

DEAR SIR: I herewith submit report of the Veterinary Bureau for the year ending December 31, 1924

Respectfully,

WERNER RUNGE,  
*Chief, Veterinary Meat Inspection Bureau*

The importance of the inspection and proper control of the sale of meat and meat products for human consumption has long been recognized by health authorities and great improvements are noticed throughout the country. Veterinarians are placed in control of slaughter houses to make ante-mortem as well as post mortem inspections of all animals killed for human food and stamp or brand such carcasses for further recognition with an official stamp.

No uninspected carcasses or parts of carcasses are allowed to be brought into the city of Newark and offered for sale unless they have undergone a rigid inspection and are passed and stamped at one of the examining stations by a properly appointed meat inspector, and if found free from disease and otherwise sound, wholesome and fit for human consumption are stamped "Inspected and Passed Department of Health, Newark, N. J." If found to be diseased, unsound, unwholesome or otherwise unfit for human food they are marked "Condemned" and are removed to a rendering plant and destroyed.

All meats and meat products furnished public institutions (City Hospital, Ivy Hill Almshouse and City Home for Women) are inspected and if passed are re-stamped before they are accepted by those institutions.

I would respectfully recommend the passage of an ordinance licensing butcher shops, etc., which shall read as follows:

No meat shop or place where meat, poultry, fish, game or shell fish or products thereof are prepared, stored or offered for sale or sold for use as human food shall be maintained in the City of Newark without first obtaining a license from the Department of Health."

This would facilitate the inspection and control the sale of meats etc., especially poultry, during the holiday season when a great many stands are opened for a week or two in various parts of the city, offering for sale the worst kind of cold storage poultry which is an imposition upon the public at large as well as an injustice to the honest business man.

During the latter part of September reports reached our office that a large number of chickens had died and were dying at some of the chicken slaughter houses. Upon investigation I learned that all of the chickens had been brought from the Middle West, Indiana, Ohio, Illinois, Kansas, etc., and that these conditions had existed for several weeks. After making a number of post mortems and observing sick as well as dying chickens we were unable to make a positive diagnosis and therefore asked the assistance of the bacteriological laboratory. Dr. R. N. Conolly, bacteriologist, submitted the following report:

Herewith is respectfully submitted a report of our investigations of an epidemic which has prevailed for several weeks among chickens at the various chicken markets in Newark.

The bodies and internal organs of seven chickens naturally infected and just dead of the disease together with two chickens experimentally infected were carefully ex-

amined and in none of them was anything observed that could be regarded as distinctively proving the cause of the outbreak.

"Chicken cholera which has an easily recognized local, as its cause was eliminated.

"Chicken pest, otherwise known as chicken typhus, which is caused by an ultra-microscopic and filtrable virus is the only known disease which would produce death of the birds and show such consistently negative anatomical and bacteriological results.

"On the basis of these results Dr. Runge procured three chickens which he knew had not been exposed to infection. Two of these were subcutaneously injected with a few drops of the heart's blood of two chickens that had died of the disease and one of the new chickens was left uninjected as a control.

Within thirty hours both injected chickens were dead and the control (uninjected chicken) remained alive and well.

"The absence of a demonstrable cause for the epidemic and the intense virulence of the blood of infected chickens forces the conclusion that the prevailing epidemic is fowl pest (pestis avium), which is a communicable and very fatal disease among chickens."

On October 31st control chicken injected with filtrate of blood of artificially infected chickens (filtrate passed through clay pencil about 4 c.c.) died within 30 hours, where five chickens coming from the Middle West, which were kept was established October 30th to November 6th, 1914, and a thorough cleansing and general disinfection came out at the freight yards, the fifty four chicken slaughter

houses and places where live chickens had been kept or stored.

The railroad companies were notified not to allow any poultry cars to be unloaded until a certificate of health of the poultry of the respective car was issued by an inspector of the Bureau of Meat Inspection.

On January 17th a state quarantine against the importation of live chickens was established by the Department of Agriculture and on December 22nd the U. S. Department of Agriculture, (Bureau of Animal Industry) issued a quarantine. To prevent the spread of European fowl pest and other similar contagious diseases of poultry. With the cooperation of the federal, state and local authorities it is expected that the disease will soon be under control and completely eradicated in this country.

The following is a summary of the activities during the year 1924:

Inspected and storage, slaughter-houses and Centre Market inspected.

Inspected and stamped at abattoirs	7,819
Inspected and stamped at abattoirs	23,362
Inspected and stamped at abattoirs	44,372
Inspected (dressed) inspected and stamped	2
Inspected (dressed) inspected and stamped	21,897
Inspected (dressed) inspected and stamped	1,290
Inspected (dressed) inspected and stamped	570
Inspected (dressed) inspected and stamped	210
Inspected	85,847
Inspected	118,584
Inspected	210,496
Inspected	194
Inspected and stamped	159,151
Poultry inspected and passed	2,025,000
Fish inspected and passed	3,161,600
Pork inspected and passed	9,812,753

Beef carcasses condemned...	
Calf carcasses condemned .....	
Sheep carcasses condemned.....	
Hog carcasses condemned .....	
Goat carcasses condemned .....	
Parts of carcasses condemned.....	
Complaints investigated.....	139
Butcher shops inspected and re-inspected.....	
Railroad cars containing live chickens inspected.....	162
Railroad cars containing live chickens held under quarantine	
Inspections at chicken slaughter houses and live chicken	
markets .....	
Live chickens held under quarantine at slaughter houses and	164
live chicken markets .....	
Chicken slaughter houses inspected.....	
Chicken slaughter houses inspected.....	

## CONDEMNED

Beef .....	2,466 lbs.	Chickens .....	30,534
Pork .....	7,403 "	Turkeys .....	5,042
Smoked pork .....	916 "	Ducks .....	22
Leaf lard .....	565 "	Geese .....	55
Veal .....	1,421 "	Guinea hens .....	10
Lamb .....	935 "	Rabbits .....	6
Bologna .....	370 "	Fish .....	7,368
Sweetbreads .....	10 bxs	Crabs .....	250

Miscellaneous meats .. 3,592 lbs

ANNUAL REPORT

OF THE

Chemist

During Mr. Baldwin's term of office, the unsealed or preliminary milk samples were analyzed by the Babcock method at the Department of Health. An order dated July 2 stated that beginning July 24, both preliminary and sealed milk samples were to be analyzed at this laboratory. The results of this work will be found below.

## MILK

For comparison the summary of milk analyses has been arranged as follows:

Total number of milk samples analyzed.....	137
Total number of preliminary samples analyzed.....	12
Total number of sealed samples analyzed.....	125
Total number of preliminary samples below standard.....	6
Total number of sealed samples below standard.....	6
Per cent total number of sealed samples below standard.....	4.8
Per cent total number of preliminary samples below standard.....	50

Average per cent. of total solids and fat in samples taken in 1923 and 1924

	Total Solids		Fat	
	1923	1924	1923	1924
Total samples above standard.....	12.18	12.19	3.49	3.5
Total samples below standard.....	11.06	11.18	3.02	3.1
Total samples above and below standard.....	12.04	12.10	3.45	3.5

## CREAM

Twenty seven sealed cream samples were analyzed, of which twenty five were found to be above and two below the standard of eight per cent. of fat.

## ICE CREAM

Fifty four samples of ice cream were analyzed. Of these seventy-seven were sealed seventy being above and seven below standard. The remaining seven samples were unsealed, three being above and four below standard.

## MISCELLANEOUS

While the scope of the laboratory has been necessarily limited there has been made a number of analyses of various miscellaneous samples.

Among these were thirty-eight samples of soft drinks examined for saccharin. No saccharin was found. Nine of these samples were also examined for glass. In two of these microscopic fragments were found.

A sample of raw meat examined contained fly larvæ. In such condition would in a short time start putrefaction and render the meat unfit for food.

Samples of cream puffs, canned shrimp, canned sauerkraut and sausage, candy and roast chicken, said to have caused illness, were examined for poisonous metals and poisons with negative results.

A prepared flour examined for poisonous metals and poisons proved to be of good quality, this being borne out by a microscopic examination.

A sample of soil from a part of the Newark meadows, taken with dredgings from the Passaic River, was examined for poisonous metals and other injurious ingredients, with negative results.

A butter sample was found to be above standard.

Two samples of raw clams examined were in good condition and fit for food.

A number of canned and bottled samples taken from premises in which a fire had occurred, including olives, corn relish, cherries, deviled ham, tomato paste and mush beans were examined to determine fitness for food. The corn and olive relish were condemned and the remaining samples were fit for food.



A sample of solution of citrate of magnesia was analyzed and found to be 30.80% below U. S. Dispensatory requirements showing the need for work of this sort.

As stated above the examination of the city water supply was begun in December, and the results are tabulated below.

ANALYSES OF NEWARK WATER SUPPLY  
 Month, July 7 to December 31, 1924  
 Parts per Million

December 1924	Temperature, degrees Fahrenheit	Turbidity	Color	NITROGEN AS			Chlorine	Temporary Hardness	Total Solids	Loss on Ignition	Fixed Mineral Matter
				Free Ammonia	Albuminoid Ammonia	Nitrites					
Oak Ridge Strm	50	4	1	108	108	0	20	33.8	45.0	19.0	26.0
Camden Stream	34	2	3	012	0	0	080	37.5	40.0	36.3	4.0
Kearney Brook	36	4	5	018	063	0	040	20.1	33.0	3.6	40.0
Robinson Strm	36	5	28	008	27	0	0.0	29.9	35.0	13.0	7.0
Mission In lake	34	5	1	00.3	0	0	030	31.8	59.0	25.0	34.0
Swedes Crk at k	38	5	17	001	.099	0	030	47.2	60.0	31.0	29.0
Crane Crk at k	36	4	25	0.0	.09	0	030	29.0	60.0	24.3	36.0
Belleme River	38	4	15	0.1	131	0	020	32.5	66.0	35.0	3.0
Liberty Pacer	41	3	17	010	026	0	010	29.9	39.3	24.0	16.0

Chemical analyses shows samples to be of good quality

TOTAL

Total number of analyses, July 7 to December 31, 1924

1,561

## LABORATORY

The work of the chemical laboratory is now being carried on in a part of the bacteriological laboratory. The space is limited and is in no way adapted to chemical work.

It is most important that a room be provided exclusively for water analysis free from laboratory fumes. Another room is necessary for ether extractions, in order that danger from fire and explosion may be eliminated. At present when an ether extraction is made, it is necessary to put out all burners in the laboratory, thus causing a delay in the work requiring their use.

It is generally desired to enlarge the scope of the laboratory to embrace all kinds of food analysis, and also the analysis of drugs, textiles, rubber goods, paints, varnishes, soaps and coal.

A great saving to the city could be made through chemical examination of the supplies purchased by various departments, to determine whether or not they are up to specification. A single example may be cited: the purchase of coal on the basis of British thermal units and ash.

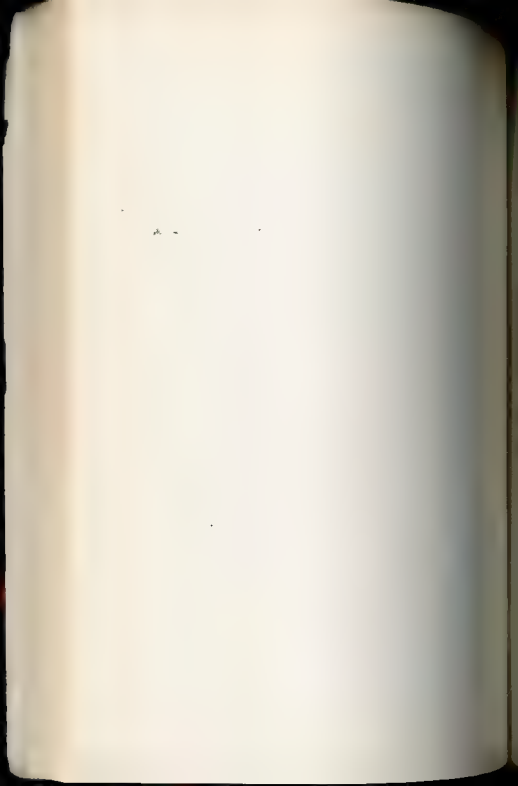
To accomplish this largely increased amount of work it is necessary that a properly equipped modern laboratory be provided with trained assistants to aid in the different lines of work.

TABLE OF MAXIMUM, MINIMUM AND AVERAGE TOTAL  
SOLIDS IN THE WATER FROM THE LABORATORY  
FAUCET, FROM 1900 TO DATE.

(Total solids, Grains per U. S. Gallon)

Year	Maximum	Minimum	Average
1900	2.06	1.96	2.53
1901	3.00	1.93	2.68
1902	2.92	1.98	2.45
1903	2.92	1.69	2.32
1904	2.92	2.04	2.52
1905	2.92	1.60	2.33
1906	3.24	2.44	2.71
1907	3.09	2.35	2.60
1908	2.92	2.22	2.66
1909	3.37	2.23	2.78
1910	3.50	2.10	2.81
1911	3.91	2.63	3.06
1912	3.32	1.92	2.94
1913	3.91	2.16	3.04
1914	3.49	2.27	2.88
1915	3.90	1.92	2.99
1916	3.55	2.56	2.98
1917	3.84	2.39	3.11
1918	4.19	1.40	3.02
1919	3.78	2.74	3.32
1920	3.44	2.62	3.05
1921	3.65	2.84	3.07
1922	3.50	2.10	2.91
1923	3.50	2.52	2.92
*1924	2.68	2.04	2.42

\*NOTE.—In 1924 only four months, January, February, March and December included



ANNUAL REPORT

OF THE

**Division of Bacteriology**



# ANNUAL REPORT

OF THE

## Division of Bacteriology

*Craster, M.D., Health Officer.*

SIR—Herewith is submitted the report of the Division of Bacteriology for the year ending December 31, 1924

Respectfully,

R. N. CONNOLLY, M.D.  
*Bacteriologist.*

In addition to the regular routine diagnostic examinations we have received during the past year a greater number of unusual problems to solve than in any year since the laboratory was founded. Among the problems presented some were simple and others serious, but all had educational value and a few instances are given below as examples.

An instance of the simple problems was a milk bottle containing a small amount of milk, brought in with the report that a family after consuming almost the entire contents of the bottle noticed a great number of "dark spots" on the inside of the bottle. Examination of the dark spots with a hand lens showed them to be insect eggs firmly attached to the glass and indicated faulty cleaning of the bottle—a rather disgusting, but not dangerous experience for the users of the milk.

The examination of the milk showed that sterilization



of the bottle and previous pasteurization protected the consumers. A partly emptied bottle was received with a similar complaint, and contained the same kind of undesirable material. The bottler resisted the bottler's efforts at cleaning.

The following is an example of more serious cases. A physician sent in a smear of blood on a glass slide. Upon examination the blood showed an increase in eosinophiles and when this was reported to the doctor he said it confirmed his suspicion that the patient was infected with trichina.

Investigation by the doctor, aided by the Laboratory Division of the Health Department discovered the victims of the disease and pork from a pig, which was divided between several families showed the trichinae scattered in great numbers through the muscles.

Another problem that engaged our attention was a disease affecting chickens. These fowl were imported from western states and were intended for the live chicken trade in Newark. The mortality among the chickens was very high and typical examination of the laboratory showed a dark bluish coloration of the combs, purulent discharge from the eyes and a peculiar gasping respiratory sound and extreme prostration. After the fowl had been dead a few days the meat usually turned very dark and decomposition soon became evident. Post mortem examination showed the constant presence of any definite cause.

From a chicken just dead of the disease a few drops of blood from the heart under sterile conditions we injected under the skin of a chicken that had been exposed to infection and in thirty hours it died of the disease. We then obtained some of

of the injected dead chicken and mixed the blood with sterile water thus making a weak emulsion of the

emulsion was passed through a bacterial filter which removed bacteria that may have been present, together with red corpuscles. The fluid that came through was clear and transparent. A few drops of this were injected under the skin of another chicken which had not been exposed to infection otherwise. This chicken died of the disease within forty hours.

These results and other tests proved to our satisfaction that the disease from which the chickens died was fowl typhus, a disease caused by an ultramicroscopic filtrable virus. Fortunately the disease is not transmissible to man, but it has caused enormous losses among fowl of various kinds; consequently it was a matter for our poultrymen to find that the disease had gained a foothold here.

An attempt was made early in the year to determine the value of the "single dose vaccine" recommended for immunizing dogs against rabies infection. After observing several months the results of two series of tests, we were obliged to regard the attempt as inconclusive because one vaccinated dog and one non-vaccinated animal came down with the disease leaving the question so far as our observations are concerned, where it was originally

The question of the responsibility of oysters for the occurrence of typhoid fever which affected persons in several places last fall and winter made it necessary to begin a systematic examination of the bacterial contents of oysters offered for sale in Newark. Colony counts on agar plates and tests for gas productions in lactose peptone-bile, as recommended in Standard Methods of the American Public

Health Association, have been carried on with oysters brought in three days each week.

We use five oysters to represent a shipment, the juice of each separately. Three agar plateable tubes are inoculated from each oyster. They are incubated for 48 hours and then we fish the plates any suspicious colonies, which are tested on Russell's double sugar agar so as to exclude the

The results of this investigation show the need of keeping supervision over the oysters offered for sale in New York. The great majority of the samples examined were surprisingly free from sewage contamination. Usually we found some that were clearly unfit for consumption in a raw state. It can easily be shown that a small shipment from a contaminated source can cause an outbreak resulting in great hardship to the consumer and needless loss to the whole oyster industry.

I would therefore recommend that bacteriological examination of oysters offered for sale in New York be a routine measure by the Health Department during the oyster season.

Samples of canned vegetables, fruit, fish and other foodstuffs have been received for examination from time to time during the year and it seemed that each sample presented some peculiar angle. The enormous quantity of canned goods consumed each year and the numerous complaints received that have a sound basis indicate that the general supply of this class of foodstuffs should be kept up with care. Our examinations usually show that the contents of unopened cans or jars received are sweet and wholesome.

#### DIPHTHERIA

In reviewing the laboratory records of the cases of

cases that passed in routine through this Division during 1924 will notice a decided decrease in the number of cases reported as compared with the records of previous years.

The case mortality, however, for 1924 was slightly in excess of that for 1923. The mortality for 1924 being 5.36% against 5.36% for 1923. This probably represents the yearly fluctuations which must be expected until the modern methods of dealing with this disease are more generally adopted.

As in former years a table is given to show the comparative figures of the incidence of diphtheria the case mortality of the disease as well as the results of antitoxin treatment in Newark for the past three years.

	1924	1923	1922
Number of cases reported.....	575	634	771
Mean age, respectively of			
all cases.....	39—6.78%	34—5.36%	73—9.4%
cases treated with antitoxin..	561	617	724
Number of deaths			
treated with antitoxin.....	38—6.77%	30—4.86%	64—8.85%
not treated with antitoxin..			
all cases.....	13	17	47
Number of deaths treated			
with antitoxin.....	1—6.66%	4—23.5%	9—19.14%

The following table serves to show the age at which death occurred in diphtheria in Newark during 1924:

Under one year.....	2	Seven to eight years.....	1
One to two years.....	12	Eight to nine years.....	2
Two to three years.....	6	Eighteen years.....	1
Three to four years.....	4	Twenty years.....	1
Four to five years.....	3		—
Five to six years.....	4		39
Six to seven years.....	3		

It is gratifying to report that through the efforts of His Honor, Mayor Breidenbach, the Director of the Health

Department, a new stable for housing the antitoxin cows was built during the year. This fills a long-felt want of the animals kept by the city for the production of antitoxin. They are now housed in a modern stable situated in healthy surroundings which insures a product from healthy animals.

## CITY WATER SUPPLY

The following table gives a summary of the bacteriological tests of samples of Pequannock water, made during 1921 and shows that the water reaches the city in its normal state of bacterial purity.

## SAMPLING POINTS

	No. of Tests	Average Bacteria per c.
Oak Ridge Stream, above Clinton Stream	24	15
Clinton Stream, above Oak Ridge Stream	24	22
Kanouse Brook, above Pequannock River	24	24
Echo Lake Stream, above Pequannock River	24	15
Masapon Intake, at Gatehouse	24	28
Cedar Grove Reservoir, Inlet Gatehouse	22	2
Cedar Grove Reservoir, Outlet Gatehouse	24	6
Belleville Reservoir, at Inlet Gatehouse	24	17
Belleville Reservoir, at Outlet Gatehouse	24	12
Department of Health, Plank and William Sts.	24	2
Laboratory Faucet, City Hospital	55	24

## PUBLIC AND SEMI PUBLIC SWIMMING POOLS

Systematic examinations of the water in the various public and semi public swimming pools of the city were carried on during the year, and the results from some of the places showed wide variations in the bacteriological content from time to time. It was evident that more rigid attention should be given to the water in these places. Some of the newer pools, however, consistently showed very low bacterial counts, indicating that it is possible to maintain a high degree of purity if the water is properly taken care of.

The following places have been under observation:

# BACTERIOLOGICAL EXAMINATION OF WATER FROM PUBLIC AND SEMI-PUBLIC SWIMMING POOLS IN NEWARK, 1924

	No. of Tests	Bacteria Average per c c
H. P. 1st Broome St., Pool .....	20	42,267
H. P. 1st Broome St., Mikveh.....	19	84,240
C. P. 36 Charlton St., Pool .....	22	31,602
C. P. 36 Charlton St., Mikveh.....	16	67,506
C. P. 141 Howard St., Pool .....	18	2,892
H. P. 141 Howard St., Mikveh.....	3	106,696
H. P. 32 Mercer St., Pool .....	22	8,646
H. P. 10 W. Park St., Pool .....	21	1,168
H. P. 107 Halsey St., Pool .....	22	17,876
Y. M. C. A. Bath, 53 Washington St., Pool.....	21	19,058
Y. M. C. A. Driven Well, 53 Washington St. ....	3	8
Y. M. C. A. Bath, High and Kinney Sts., Pool.....	10	422
T. P. Abraham, 621 Clinton Ave., Pool .....	2	1,260
C. P. Paterson St., Pool .....	18	125
Newark Athletic Club, Park Place, Pool.....	18	19
Newark Park Pool .....	7	1,650
C. W. Laboratory, Laurel .....	55	24

## RABIES

This disease has been very prevalent among dogs during 1924 and Newark has had to furnish free treatment to its residents to the extent of sixty-five persons who had been exposed to infection by coming in contact with dogs known to be mad. While the number of such cases has been less than the previous year, yet sixty-five persons subjected to this danger is entirely too many. A muzzling ordinance was enforced during the hot months of 1924 which appeared to reduce the number of dog bites at that time, and it is recommended that the measure be carried out in future years until the danger from this dread disease is reduced to a minimum.

## CITY MILK SUPPLY

Bacteriological examination of the general milk supply of the city, as well as the City Hospital supply has been carried on systematically during the year and the detailed report of Dr. G. Ward Dishrow, Assistant Bacteriologist which is here included shows that the general supply has been of a very fair character.

R. N. Connolly, M.D., Bacteriologist

DEAR DOCTOR: I herewith respectfully submit a report on the bacteriological examinations of the city milk supply for the year ending December 31, 1924.

Respectfully,

G. WARD DISHROW, M.D.  
Assistant Bacteriologist

During the year 1924 inspectors of the Food and Drugs Division of the Department of Health brought 2,946 samples of milk to the general city supply to the laboratory for bacteriological examination. These were divided as follows: Sterilized, 1,04; A Raw, 1,04; A Pasteurized, 537; B Pasteurized, 1,215. They also included a series, totaling 48 samples, from pasteurizing plants taken during process of pasteurization. From the City Hospital supply 44 milk samples covering 553 cans were examined making a total of 3,438 bacteriological plate counts. Inasmuch as each of these samples was also examined microscopically for streptococci and pus the total number of examinations made during the year was 6,876.

Comparison with the requirements of the city milk ordinance shows that 92.30% of the 2,946 milk samples compared with the standard of 10,000 bacteria per c.c. permitted. 84.67% of the A raw samples came within the requirements of that grade; 85.66% of the A pasteurized and 82.22% of the B Pasteurized were also satisfactory. This shows an improvement over 1923 when the figures were 91.42%, A raw, 82.14%, A Pasteurized, 83.9% and B Pasteurized, 78.24%.

Of the 44 examinations of the City Hospital supply, 70.45% were within the requirements for grade B Pasteurized milk. This shows that 1923 when 77.36% of the samples examined were satisfactory.

In the series of 3,038 microscopic examinations for streptococci and for 47 or 1.21% of the A raw samples were found thus contaminated. This is an improvement over 1923 when 2.6% of all samples contained this organism. No streptococci were found in the samples of A Pasteurized or B Pasteurized milk, and none in the City Hospital supply.

## SUMMARY

Control	104	92.30%	acceptable
A Raw	1090	84.67%	acceptable
A Pasteurized	537	85.66%	acceptable
B Pasteurized	1215	82.22%	acceptable
City Hospital	44	70.45%	acceptable
	2990	83.91%	acceptable
Pasteurizing plants	48		
Bacteriologic Examinations	3038	1.21%	positive
Total Examinations	6076		

The following table shows the routine work of this Division in 1924 together with similar activities for the previous year:

	Total for 1924	Total for 1923
<b>Diphtheria—</b>		
Cultures for diagnosis	16,143	14,412
Swab cases	359	378
Cultures for diagnosis and disinfection	17,203	15,488
<b>Diphtheria Antitoxin—</b>		
Doses produced during the year	1,885	2,726
Doses distributed during the year	2,310	2,636
<b>Tuberculosis—</b>		
Specimens of sputa, etc., examined	2,156	2,346
Specimens of sputum containing tubercle bacilli	227	450
<b>Typhoid Fever—</b>		
Blood examinations for typhoid (Widal)	656	1,817
Blood examinations for typhoid (positive)	52	64



## Malaria

Blood examinations for malaria.....	55	
Blood examinations for malaria (positive).....		12

## Milk Supply

Milk examinations general city supply.....	3612	
Milk examinations, City Hospital supply.....	529	312

## Water Supply—

Water examinations, Pequannock supply.....	181	
Water examinations, wells and cisterns.....	84	14

## Venereal Diseases—

Specific catarrhal examinations.....	5183	288
Specific catarrhal examinations (positive).....	589	47

## Rabies—

Brain tissue of animals examined.....	173	
Number of positive cases found in animals.....	73*	
Preventive treatment to exposed persons.....	63	

## Vaccines ca—

Typhoid vaccine, doses distributed.....	762	100
Pertussis vaccine, doses distributed.....	489	100
Tuberculin for treatment and diagnosis.....	156	100

## Water from Swimming Pools and Tanks—

Swimming pools.....	239	200
Wading pools.....	4	
Samples of ice examined.....	8	

## Oysters and Clams—

Oysters.....	35	
Clams in shell.....	10	
Clams shelled and strung.....	2	

## Stools and Urines for Typhoid—

Stools for typhoid.....	152	
Urines for typhoid.....	152	

\*Included in above report are 46 cases of rabies in animals in from out of town.

ANNUAL REPORT

OF THE

**Serological Laboratory**



# ANNUAL REPORT OF THE Serological Laboratory

J. CRASTER, M.D., Health Officer

DR. CRASTER:—Herewith is submitted the report of the work performed in the Serological Laboratory for the year ending December 31, 1924.

Respectfully submitted,

HARRISON S. MARTLAND, M.D.,  
Pathologist

The total number of examinations made were 18,220, far exceeding that of any previous year since the establishment of the laboratory.

During the year 13,810 Wassermann tests were made for the detection of syphilis. It is interesting to note that the test is still used by physicians more as a diagnostic exclusion test in general medicine and surgery than for the diagnosis of frank active syphilis. Active syphilis is usually easily diagnosed clinically, but the presence of old and latent syphilis is often difficult to recognize, and the chief value of the Wassermann test is to exclude syphilis as an etiological factor in general medicine and surgery.

The reporting of venereal diseases as required by the State Department of Health tends to lead many physicians to deal with such cases without such aids as may expose the patient's identity to even semi-public records. Many patients will go

to 'quacks' or outside of the State for treatment rather than submit to a report of their disease to any authority other than their own physicians.

Wassermann tests are made on every Tuesday, Wednesday, Thursday and Friday. Blood tests received in laboratory before 12:00 M are reported on the following day.

During the last four months of the year the technique the Wassermann test was changed from an older method using crude alcoholic antigen with four hours icebox fixation, to the Kolmer Standard Technique using cholesterolized antigen with eighteen hours icebox fixation. The great increase in positive reactions without obtaining false positive results have been astonishing and are tabulated below.

	Blood Wassermanns	Positives
January .....	381	136
February .....	1,125	90
March ....	1,194	113
April .....	1,125	81
May .....	1,015	46
June .....	1,076	51
July .....	1,215	51
August .....	1,017	41

Crude alcoholic antigen with four hours ice-box fixation

September .....	1,028	176
October .....	1,190	191
November .....	1,431	193
December .....	1,165	158

Kolmer technique with eighteen hours ice-box fixation and cholesterolized antigen

13,407 1,332

With old method -

9,141 blood Wassermanns with 614 positives or 67%

Wassermann Test -

425 Wassermanns with 718 positives or 16.8%.

These results we feel warrant the extra time and more expensive technique required to perform this test. We feel that about 10 to 15 to 20 per cent. is about the incidence of syphilis in admissions to a general hospital in a large city.

From our experience this laboratory has had with the Wassermann test firmly convinces us that such an important test should only be performed in laboratories under city or state control, which are thoroughly equipped to handle the work and are constantly performing a large number of tests.

Furthermore, the close liaison between the wards and the City Hospital, City Dispensary and the laboratory allows us to have a very important clinical check on the results of a large number of the Wassermann reactions - a very important factor in the proper performance of the Wassermann test.

#### ANNUAL SUMMARY OF LABORATORY WORK DONE IN THE SEROLOGICAL LABORATORY AT THE CITY HOSPITAL IN 1924

	Separate Totals	
	Items	Only
Wassermann Tests		
of Wassermanns	13,307	
of Wassermanns	1,332	
of Wassermanns	503	
of Wassermanns	53	
	—	13,810
Non-Wassermann Tests		
Physicians and hospitals of Newark	7,867	
Hospital	3,641	
Dispensary	2,302	

## How Wassermann Was Used:

As diagnostic and therapeutic aid in the first two years of syphilis	352
As diagnostic and therapeutic aid in old and latent syphilis	1,120
As diagnostic aid in general surgery and internal medicine	12,338

## Examination of Venereal Sores:

Darkfield examinations (Including stained smears and aspiration of regional glands)	104
Positive	76

## Examination for Gonococcus.

Smears for Gonococci (City Hospital only)	3,650
Positive	361

## Examination of Spinal Fluid

Routine Serological examination (Including cell counts, colloidal gold, etc.)	656
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## CULTURE COLLECTORS

Following is a summary of the work performed by the culture collectors attached to the Bacteriological Laboratory, whose duty is to supply the culture stations with apparatus and outfits for taking diphtheria cultures, sputa, Wassermanns, typhoid and other blood tests, collect daily a such outfits used and left at the stations by the doctors and delivered to the laboratory, with figures for past five years.

	1924	1923	1922	1921	1920
Outfits delivered	2,258	2,431	2,997	3,035	3,163
Specimens Delivered—					
Cultures	11,363	11,488	11,641	14,014	12,309
Sputa	3,512	3,458	4,213	4,806	4,271
Typhoid	1,019	1,040	1,194	1,324	1,133
Wassermanns	8,954	7,602	6,661	5,938	5,341
Cataracts	4,515	3,736	3,364	3,308	2,933
Specimens Collected—					
Cultures	14,720	12,772	12,611	15,415	8,835
Sputa	1,974	2,472	2,745	3,099	2,880
Typhoid	350	*1,804	*5,494	4,901	687
Wassermanns	7,263	6,122	5,253	4,830	3,935
Cataracts	2,731	2,368	2,021	2,065	1,986

\*The Typhoid collections much greater than delivery inasmuch as the Dispensary secured their own sets for Food Handler examinations and culture collectors delivered them to the laboratory.





Ward	STATION	Address	Telephone No.
Seventh	Rock Pharmacy	279 Bank Street	3141 Mulberry
Eighth	W. W. Greenleaf	80 Washington Avenue	6279 B B
Eighth	Central Pharmacy	289 Bellevue Avenue	0453 B B
Eighth	Quinn	187 Bonfield Avenue	1052 Humboldt
Eighth	Resnick's Pharmacy	449 Sumner Avenue	4005 B B
Eighth	L. Arnold	684 Mt Pleasant Avenue	4134 B B
Eighth	8th Precinct Police Station	Washington Avenue	5490 Market
Eighth	A. L. Linn	34 Belmont Avenue	3142 B B
Ninth	Linnatt & Bur	77 Lincoln Park	3334 Mulberry
Ninth	Solm Drug Co	1173 Pearl Street	5763 Bigelow
Ninth	B. M. Gordon	106 Bergen Street	5740 Terrace
Ninth	Bergman's Pharmacy	175 Tenth Avenue	5825 Bigelow
Tenth	White Pharmacy	75 Wright Street	1331 Waverly
Tenth	East Side Pharmacy	Adams Waverly Street	4279 Mulberry
Eleventh	Stoneman Pharmacy	480 Orange Street	0197 B B
Eleventh	5th Precinct Police Station	Orange and Sixth Streets	5400 Market
Twelfth	O. Scholz	131 Wilson Avenue	1951 Mulberry
Twelfth	11 West	28 Flaming Avenue	6267 Market
Twelfth	3rd Precinct Police Station	Flaming Avenue and Read Street	5400 Market
Thirteenth	A. M. Roue	1041 South Orange Avenue	2878 Mulberry
Thirteenth	Avon Pharmacy	191 Avon Avenue	5096 Mulberry
Thirteenth	A. Roach	601 Springfield Avenue	2444 Waverly
Thirteenth	7th Precinct Police Station	South Orange Avenue	5400 Market
Thirteenth	Byrne's Pharmacy	12th Street and South Orange Avenue	2074 Market
Fourteenth	F. L. Fenit	76 Belmont Avenue	5835 Bigelow

## ANTITOXIN AND CULTURE STATIONS, BY WARDS—continued

Ward	STATION	Address	Telephone No
Fourteenth	A Korble	362 Springfield Avenue.	1407 Bigelow
Fourteenth	4th Precinct Police Station	Seventeenth Avenue	5400 Market
Fourteenth	C Wuenisch	Springfield and 18th Avenue	2484 Waverly
Fourteenth	Siegel Pharmacy	129 Sixteenth Avenue	5838 Bigelow
Fifteenth	E. Broch	398 Central Avenue	3301 Market
Fifteenth	L. Haggy	Central Avenue and Fifth Street	4189 B B
Fifteenth	Bowers Pharmacy	286 Orange Street	0734 B B
Sixteenth	F. Jung	531 Union Avenue	2408 Waverly
Sixteenth	W. J. Writ	821 Clinton Avenue	2871 Waverly
Sixteenth	6th Precinct Police Station	Huntingdon and Bigelow Streets	5400 Market
Sixteenth	B & B Pharmacy	112 Clinton Place	3059 Bigelow

ANNUAL REPORT

OF THE

City Dispensary



## DISTRICT PHYSICIANS' LINES

(Home treatment for indigent patients)

*First District*—East Kinney Street from Jefferson Street to Belmont Avenue, to Eighteenth Avenue, to City Line, to an imaginary line of Jefferson Street, to East Kinney Street. District Physician Dr. Abraham Rothseid, 59 Avon Avenue. Telephone Terrace 1630.

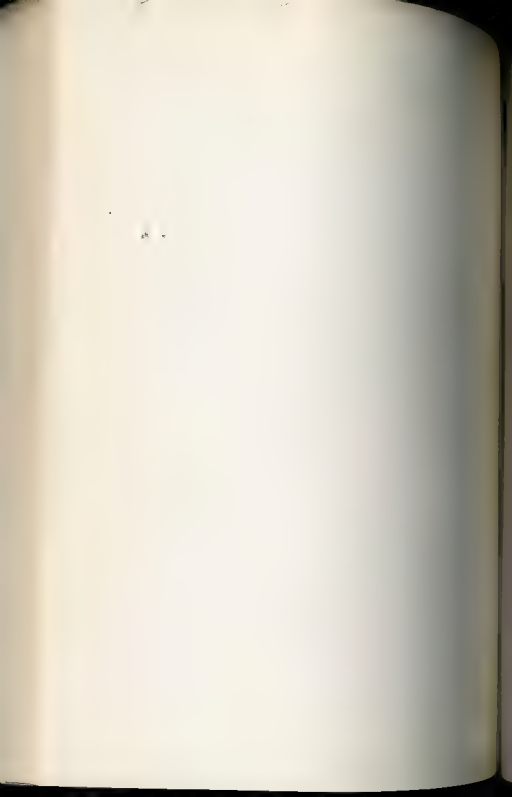
*Second District*—Sussex Avenue from Norfolk Street to North Fifth Street, to Orange Street, to City Line, to South Village Line, to Irvington Line, to Twentieth Avenue, to Eighteenth Avenue, to Belmont Avenue, to Jones Street, to Norfolk Street, to Sussex Avenue. District Physician Dr. Thomas J. Kelly, 69 Roseville Avenue. Telephone Pranch Brook 4866.

*Third District*—Fulton Street from Passaic River to East Street, to East Kinney Street, to Jefferson Street, to Passaic River. District Physician Dr. Watson F. L. Roderick, 21, Ferry Street. Telephone Market 1764.

*Fourth District*—Jefferson Street from Passaic River to City Line south to Newark Bay, to Passaic River, to Jefferson Street. District Physician Dr. William T. Rumage, 22 Juliette Street. Telephone Market 0471.

*Fifth District*—Central Avenue to Sussex Avenue, to North Street, to South Orange Avenue, to Jones Street, to East Kinney Street, to Broad Street, to Central Avenue. District Physician Dr. Michael J. Coffey, 24 Breintnall Park. Telephone Market 8460.

*Sixth District*—Fulton Street from Passaic River to Central Avenue, to Sussex Avenue, to North Fifth Street, to Orange Street, to East Orange City Line, to Belleville City Line, to Passaic River, to Fulton Street. District Physician Dr. M. Jedel, 125 Fourth Street. Telephone Humboldt 127.



## CITY DISPENSARY MEDICAL STAFF

## MEDICAL

DR. DANIEL MITCHELL, *Chief*

DR. JULIUS BERNSTEIN

DR. MEYER L. LEVIN

DR. SOLOMON I. LURIE

## SURGICAL

DR. DAVID KRAKER, *Chief*

DR. M. G. DUBOIS

DR. I. D. HASKELL

DR. Z. D. B. BALSON

DR. HARRY ALTON SCHACHTER

DR. WM. ZUCKERMAN

## GENITO-URINARY

DR. C. R. O'CROWLEY, *Director*DR. SIDNEY C. KWIER, *Chief*

DR. PAUL MENK

DR. WM. RUMAGE

DR. SAMI ROTHENBERG

DR. NICHOLAS RAMOS

DR. MARTIN BROTMAN

DR. NICHOLAS DEL DEO

DR. WM. G. NASH

DR. ROBT. SELLERS

DR. JAMES DI JASO

DR. RALPH SALZBERG

DR. EDWARD SEIDMAN

DR. ASABORO AITOTINTA

DR. AMES FILIPPONE

DR. MIGUEL STEINBERG

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DR. A. J. GORDON

## SKIN

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DR. EDWIN A.

DR. EDWIN B.

DR. EARL LEROY WOOD

DR. FRANCES McCAULEY

DR. NATHAN B. HELLER

DR. NICHOLAS DEL DEO

DR. EARNEST KAUFMAN

DR. ROBT. SELLERS

DR. AMES FILIPPONE

## RECTAL

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DR. WM. HAUCK

DR. CARL H. WINTCH

DR. IRVING BIEMAN



## DEPARTMENT OF PUBLIC AFFAIRS

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Dr. MIGUEL STEINBERG

Dr. LOUIS MARTUCCI  
Dr. M. M. WEISSBERG

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Dr. JULIUS SOBIN

Dr. CHAS. ENGLAND

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Dr. GEMMEL

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Dr. SELMA WELLS

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Dr. IRVING WHITNER

Dr. JULIUS SOBIN

Dr. WM. GREEN

Dr. LOUIS DAVIS

## CHILDREN

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Dr. J. E. SCHRAMM

Dr. HARRY B. SLOTT

Dr. HAROLD GOLDBERG

Dr. ARTHUR HEYMAN

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Dr. M. J. FINE, *Chief*

Dr. WILLIAM TRAVIS

## CLINICS

—Daily, 9 A. M.

OF CHILDREN Daily, 10 A. M.

—Daily 9 A. M.

CLINIC—Monday and Thursday, 10 A. M.

OF WOMEN—Tuesday, 3 P. M.

CLINIC—Wednesday, 10 A. M.

OF SKIN—Tuesday and Friday, 9 A. M.

MALE Monday and Wednesday, 3 P. M.

FEMALE—Wednesday 3 P. M.; Friday 9 A. M.

NOSE AND THROAT Monday and Friday, 3 P. M.

CLINIC—Tuesday, Thursday and Saturday, 9 A. M.

—Daily, except Saturday, 12 30 P. M.

CLINIC—Thursday, 3 P. M.

—Thursday, 10 A. M.

—Thursday, 3 P. M.

COUNTY HOSPITAL PAROLE CLINIC—

—Tuesday, 2 P. M.

OF DISEASES—Friday, 2 P. M.

—Tuesday and Friday, 10 A. M.

—

CLINICS—

and Children—Daily, except Saturday, 3 P. M.

Clinic—Wednesday, 6 P. M.

Clinic—Tuesday, Friday and Saturday, 9 30 A. M.

—

TO SANATORIUM—

—Friday, 9 30 A. M.

Gardner—Wednesday 9 30 A. M.



# ANNUAL REPORT

## OF THE

# City Dispensary

Charles V. Craster, Health Officer.

SIR—I herewith submit the annual report of the dispensary for the year 1924

Respectfully,

HENRY A. OLTMAN,  
*Apothecary.*

Number of new cases in clinics.....	12,324
Number of visits made by patients.....	61,110
Prescriptions filled.....	65,202
Admitted to City Hospital and other institutions.....	1,917
Number of vaccinations.....	650

As there has been no departure from the usual routine dispensary activities for the year 1924, it is well to emphasize the importance of the dispensary as a social and health conserving institution.

In consonance with the growth of preventive medicine and the development of public health movements the dispensary has become in large measure a public health center, educational as well as curative. Its central location brings to its care many incipient ills whose prompt relief results in saving wage earning patients considerable loss.

Access to our citizens has made the dispensary popular. Visits have increased ten per cent. over last year, with a corresponding increase in the number of visits made by

patients. Nearly 4,000 more prescriptions were filled in 1923 and hospital accommodations for nearly 400 patients more arranged for. Vaccinations performed at the clinic have nearly doubled.

All the varied functions of a well-organized dispensary have been faithfully discharged during the year and it is therefore, not an idle phrase to record sincere appreciation of the cordial and friendly co-operation of the entire staff, especially for their constant advice and helpfulness in matters pertaining to the medical and administrative policies of the dispensary.

TABLE 1. MONTHLY REPORTS OF CASES OF DYSPEPSIA, 1910-1911

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Perinatal	42	23	70	77	27	33	28	38	34	24	22	24	553
Medical	400	197	520	430	485	535	581	595	528	506	479	376	5090
Surgical	470	452	437	334	303	418	412	526	454	439	286	317	4848
Dis. of Stom.	228	212	310	237	226	265	229	236	206	230	154	188	2440
Syphilis	1204	1193	1164	1125	1046	1196	1091	1051	1108	1153	1080	1034	13525
Children	225	174	212	219	143	213	308	261	222	267	230	201	2695
Gynaecological	74	79	90	105	92	123	143	128	103	101	44	95	1112
Genito-Urinary	714	762	694	639	710	769	664	622	687	710	695	723	8340
Eye, Ear, Nose and Throat	124	172	162	130	175	179	162	155	134	144	135	137	1712
Neurological	42	99	70	82	71	54	61	109	96	78	53	48	884
Tuberculosis	847	782	859	655	734	633	563	444	466	474	552	603	5597
Dental	197	167	167	115	214	257	238	148	128	236	115	150	2162
Orthopedic	627	470	609	600	608	486	508	427	423	537	364	406	6065
Rectal	68	90	109	81	70	76	89	86	57	92	61	60	939
Cardiac	21	15	17	19	18	25	41	29	31	22	20	21	219
Mental	37	46	16	47	62	48	39	33	41	47	74	28	465
Metabolic	34	46	85	80	93	89	97	66	77	79	58	89	893
Vascular	184	64	11	13	214	52	8	15	55	21	5	4	650
Total Treated	5551	5745	5600	4942	5289	5405	5267	4987	4910	5184	4237	4521	61110
Cumulative per cent.	5942	5726	5864	5203	5660	5798	5611	5372	5261	5434	4668	4965	65302

## NEW CASES IN CLINICS FOR THE YEAR 1924

Prenatal .....	117	Eye, Ear, Nose and Throat .....	104
Mid cal .....	1,984	Neurological .....	10
Surgical .....	1,321	Tubercalosis .....	2,462
Skin .....	1,078	Dental .....	1,124
Syphilis .....	431	Craniopedic .....	2
Children .....	1,248	Rectal .....	1
Gynaecological .....	494	Mental .....	71
Cardiac .....	96	Metabolic .....	172
Genito-Urinary .....	396		
Total number of new cases .....			12,324

DISTRICT PHYSICIANS' VISITS AND PRESCRIPTIONS  
1924

Districts	Total Prescriptions	Total Visits
First .....	129	666
Second .....	293	990
Third .....	161	543
Fourth .....	123	1,106
Fifth .....	156	1,560
Sixth .....	128	461
Total .....	990	5,426

## RECAPITULATION

	1923	1924
Total number treatments .....	56,009	61,111
Total number prescriptions dispensed .....	6,170	6,524
Total number patients sent to hospital .....	1,243	1,157
Total number vaccinations .....	393	78
Total number patients in clinics .....	11,058	12,324
Total number district physicians' prescriptions dispensed .....	1,251	990

## ANNUAL REPORT OF DENTAL CLINIC

1924	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
Examination	1	2	3	3	1	1	1	1	1	3	1	1	8
Fractured Jaws	5	1	3	3	4	6	5	1	1	1	1	1	31
X-Ray	7	1	1	2	3	6	8	10	6	2	2	3	38
Fillings	2	10	17	11	23	2	8	10	6	15	4	8	103
Oral Pathology	1	1	1	1	2	2	2	2	1	1	1	1	13
Oral Operations	1	1	1	1	2	2	2	2	1	1	1	1	13
Extractions	20	25	17	17	37	27	27	18	18	31	16	24	267
Teeth	30	38	21	21	37	27	26	25	18	16	10	21	240
Adult	2	3	5	3	36	44	43	45	40	49	53	9	409
Children	28	15	14	19	1	11	2	6	4	26	9	3	138
Deciduous	26	15	14	19	4	11	2	6	4	26	9	3	138
Teeth	50	48	53	28	33	37	36	22	26	60	34	38	435
Total	181	146	189	131	7	168	140	113	101	115	99	117	1,771

## CASES REFERRED FROM INSTITUTIONS

Parochial Schools	520	Eye & Ear Infirmary	7
Dispensary Clinics	990	Alms House	1
Public Schools	230	State Rehabilitation Clinic	1
Other Institutions	13		
Social Service Bureau	5		
City Hospital	4	Total	1,771



PATIENTS SENT TO CITY HOSPITAL BY PERMITS ISSUED FROM DISPENSARY FOR CITY  
HOSPITAL AND CITY BEDS MAINTAINED BY OTHER HOSPITALS

HOSPITALS	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct.	Nov.	Dec.	Total
City Hospital	61	76	85	63	67	70	76	67	68	71	70	71	835
St. Michael's	7	4	7	3	5	1	4	2	2	2	6	5	46
St. James	11	8	9	4	6	8	1	3	3	5	6	8	74
St. Barnabas	8	8	7	8	8	5	6	7	3	4	10	10	80
New York Memorial	7	2	1	3	4	6	3	3	4	3	10	11	59
Beth Israel	13	16	1	15	11	10	13	2	15	4	33	9	188
Mount Sinai	40	15	21	25	33	16	47	47	38	17	23	19	285
Eyes and Ear Infirmary	1	18	20	23	26	31	26	9	58	36	38	46	416
Hospital and Home for Crippled Children	0	2	2	1	2	0	0	0	0	0	3	0	9
Eight Ave Day Nursery	0	0	0	3	0	0	0	0	0	0	0	0	0
Newark Maternity	6	1	3	2	2	3	3	3	3	5	3	2	42
Total	152	167	131	144	162	166	179	132	163	154	176	175	1917

## BUREAU OF VENEREAL DISEASES

Dr. Charles V. Craster *Health Officer*

DEAR SIR:—Following is the annual report of the Bureau of Venereal Diseases for the year ending December 31, 1924.

Respectfully submitted,

H. J. F. WALLHALSER,  
*Director.*

E. LEROY WOOD,  
*Assistant Director.*

The Bureau of Venereal Diseases greatly increased its activities during the year 1924. The attendance at the clinic has been most noticeable, proportionately in the divisions of women syphilitics. The reason for this increase in treatments administered is not due to the fact that there has been a greater prevalence of disease in the city but rather to an improvement in the system of following up cases and making sure that they attend and receive treatment until cured. Another factor responsible is that the technique of the Wassermann reaction at our laboratory has been changed so that the reaction is far more delicate, detecting positive syphilitics giving a four plus reaction in cases where the reaction would have been of a lower degree or negative by the previous methods.

The gonorrheal cases have been followed up most closely and improved methods inaugurated by the physicians in charge of the clinic. The clinic has increased its facilities so that minor operations such as circumcisions and bilateral orchiectomies can be done at the clinic in selected cases instead of referring all for hospitalization.

Cooperation with the Police Department and Judge Boettner of the Family Court has improved, the magistrate

presiding being heartily in accord with the activities and purposes of the bureau. He insists that all sex offences be referred to this bureau for our opinion of the disease status and when the reports are submitted to him greater care is exercised to make sure that all diseased individuals are placed under treatment.

In reference to the cases reported as being under the care of private physicians, a noticeable feature is that many physicians are requesting the assistance of the bureau in following up cases that have become delinquent. Physicians of the city are appreciating more and more the valuable, intelligent and confidential co-operation offered them by this bureau in controlling their private cases that are prone to neglect their condition or report for treatment at irregular intervals. The State Bureau of Venereal Disease Control at Trenton, N. J., has been endeavoring to induce physicians to report the sources of infection of all their venereal patients. This information has been sent to our bureau for investigation and follow up. However, we have always received directly and more promptly the same information from the physicians and many sources of infection have been found by this means. The patients have been placed under treatment, restricting them from their promiscuous habits and so lessening the disease incidence in the city.

A new campaign has been instituted to secure the cooperation of the pharmacists of Newark. It has been a time honored custom among venereally diseased individuals to consult a druggist about their condition before seeking advice and treatment from a qualified physician. This has resulted in the druggist recommending some venereal preparation or prescription to the patient, making an effort to first improve the patient's condition before referring him to a physician or clinic. The consequence has been that

and these unethical methods have been tried the disease has gained a stronger foothold so that when clinic advice is sought the disease is more firmly seated and more difficult to eradicate.

An endeavor is being made to secure the co-operation of pharmacists of Newark by referring all cases request prescriptions for the treatment of venereal disease to a specially qualified physician or clinic immediately.

#### EXAMINATION FOR GONOCOCCI AT CITY DISPENSARY

Smears taken	1,659
Positive	566

#### NUMBER OF CASES REPORTED BY PRIVATE PHYSICIANS

	1923	1924
Reported	800	846
Positive	870	947
Reported	14	18

#### FOOD HANDLERS EXAMINED

Number of Wassermann tests	14
Number of Wassermann tests positive	3
Number of smears taken	4
Number of smears positive	0
Number of Wassermann tests taken at the Newark City Dispensary	1,926

#### TOTAL NUMBER OF INVESTIGATIONS MADE BY BUREAU WORKERS

Investigations	871
At camps	279
Total number of investigations	3,956

## VENEREAL DISEASE BUREAU

1914	GONORRHOEA				SYPHILIS				CHANCEROLS				TREATMENT				No. to Hospital				Obtained as Discharged				Discharged
	Old Cases		New Cases		Old Cases		New Cases		M		F		M		F		M		F		M		F		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
January	343	7	49	0	766	964	18	0	354	464	0	0	0	0	0	0	0	0	0	0	0	0	0	55	
February	350	5	32	0	80	273	9	0	36	93	0	0	0	0	0	0	0	0	0	0	0	0	0	28	
March	255	8	27	1	24	231	15	14	134	512	1	0	1	0	2	1	0	2	1	0	1	0	1	64	
April	292	0	54	0	185	0	56	0	0	90	564	0	0	0	0	0	0	0	0	0	0	0	0	0	
May	205	14	2	0	150	182	7	1	0	154	602	1	0	1	0	1	1	1	1	1	1	1	1	57	
June	229	13	15	0	205	185	28	2	0	180	642	1	0	1	0	0	0	0	0	0	0	0	0	14	
July	239	1	27	1	20	72	30	11	0	0	604	2	0	0	0	2	0	2	0	0	0	0	0	34	
August	276	2	5	1	240	54	15	1	0	100	513	0	0	1	0	0	1	0	1	0	1	0	1	82	
September	279	12	58	2	241	192	26	4	0	216	68	0	0	0	0	0	0	0	0	0	0	0	0	57	
October	277	14	33	0	109	98	24	7	0	124	225	0	0	1	0	1	1	1	1	1	1	1	1	10	
November	285	14	32	2	24	215	9	26	0	145	634	0	0	0	0	0	0	0	0	0	0	0	0	35	
December	453	14	35	0	221	22	15	6	0	1198	679	0	0	1	0	1	1	1	1	1	1	1	1	39	
Total	3007	136	384	16	2761	4524	295	94	0	1453	7461	26	7	10	8	2379	523								

Money of New & South Africa is given to the Secretary of the City of Cape Town  
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520

115

2002

New &amp; South Africa is given to the Secretary of the City of Cape Town

## DEPARTMENT OF HEALTH

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## TABLE C-NOTES

Year and Month of Discharge	Number		Males		Females		Total		Males		Females		Total		Number of Prisoners Excluded
	P	M	T	M	T	M	T	M	P	M	P	M	T		
January	18	13	4	0	11	13	11	13	2	2	13	11	25	25	603
February	35	56	8	6	31	50	31	50	2	5	34	51	92	92	
March	51	61	8	5	49	56	49	56	3	1	54	60	118	118	
April	25	40	4	2	21	38	21	38	0	2	25	38	63	63	
May	35	51	2	0	33	31	33	31	1	1	34	30	65	65	
June	31	31	2	2	29	29	29	29	1	4	30	27	62	62	
July	12	11	1	0	11	11	11	11	0	3	12	8	33	33	
August	18	14	4	0	14	14	14	14	1	1	17	13	32	32	
September	10	12	5	1	5	11	5	11	0	0	10	12	22	22	
October	18	21	7	1	11	20	11	20	1	0	17	21	39	39	
November	13	21	4	1	9	20	9	20	0	2	13	19	34	34	
December	12	10	4	2	8	8	8	8	2	0	10	10	22	22	
Total	282	321	50	20	232	232	232	232	13	21	260	292	603	603	

Communicated to California Penitentiary

33

Communicated to Reformatory

0

Communicated to State Home for Girls

2

Cases on Parole

10

PAROCHIAL SCHOOL MEDICAL INSPECTION  
1924

The twenty six parochial schools of the City of New York had an enrollment of 14,625 pupils during the year 1924, giving to each of the six parochial school nurses the duty and supervision of approximately twenty four hundred and thirty three pupils. Every pupil undergoes at least one physical examination by the nurse attending the school during the school year, who notes all physical defects and sees that they are remedied. Observations are made at the same time upon the nutritional status of each one and when groups of children are found to be below the normal development, nutritional classes are formed. The control of epidemic diseases among children, the nursing service in the schools is most valuable, especially when children have been absent owing to sickness. Upon return to school the inspector nurse has frequently found children recovering from scarlet fever or recovering from diphtheria with the bacillus still present in the throat. The greater number of exclusions from school during the winter period, are due to the presence of contagious diseases and symptoms in the pupil. A good nursing service in the school invariably makes for less vermin and cleaner children. In this way the nurses report favorably upon the "vogue" of bobbing the hair in children which makes the hair easy to comb and keep clean.

A better body hygiene has been observed in recent years among school children with more intelligent efforts in keeping children suitably dressed for winter and summer. The inspection service has been particularly valuable in winter when shoes and stockings are examined in wet and cold weather for wet or leaking shoes. There is no more prolific cause than wet feet in school as a producer of pneumonia among children. Parents are able to

to pay for shoes are helped by means of the Children's Emergency Relief Fund, which functions to provide shoes at nothing free or at low prices, payment for which is so arranged so that the parents may pay back the amount advanced. This service is available for all school children.

#### DEFECTS FOUND

As a result of the 13,642 physical examinations made by the nurses during the year, there were 6,207 children found with dental defects, 4,848 or 79 per cent. of which were removed, either as a result of attendance at free dental clinics or by a private dentist employed by the parents. At the present time two schools carry on dental work in their own buildings and employ volunteer or paid dentists for this work. A small charge is made at one of them, but elsewhere the dentist service is free to its pupils.

For all ear defects found, numbered 1,013 of which 828 or over 80 per cent. were taken care of. The majority of these were cases requiring eye examination and the provision of proper glasses. The assistance of oculists and optometrists has been obtained for these cases, many of whom were enabled to obtain glasses at cost price. Where parents were unable to pay for expensive glasses, appeals to charitable agencies seldom failed to obtain the necessary funds. The defects not taken care of under this head were cases of deafness, congenital or acquired. The 1,107 skin defects were commonly eczema, boils, or impetigo, the remedy percentage being high, 1,040, nearly 100 per cent.

Nose and throat defects included enlarged adenoids and tonsils numbering 1,346 of which 900 or 66 per cent were taken care of. Many of these cases were, however, not sufficiently important to insist upon the requirement of operation and in many cases private physicians' certificates



were sent in advising against the procedure. The Children's Welfare Law of New Jersey, 1915, is, however, sufficiently powerful to make all parents carry out whatever medical procedure is necessary if the child is suffering physically from the defect to such an extent as to endanger health and welfare.

Cases of vermin found numbered 1,416 of which the greater number, 1,285 or 90 per cent., were reemanded. This somewhat overstates, however, the proportion of children so infected in the schools, inasmuch as a number of them were presumably children once clean who became re-infected from time to time.

#### EXCLUSIONS

The total number of children excluded from school numbered 1,909 for the following reasons:

Non-acc. nation	1
Unclean, vermin etc.	1
Skin diseases, impetigo, etc.	2
Suspicious symptoms, cold, fever, etc.	1
Contagion, measles, scarlet fever, chicken pox, etc.	2
Miscellaneous	1
Total	1,909

#### SCHICK TESTING

The total number of children Schick tested during the year was 2,935 which with 1,835 tested during 1923 gives a total of 4,770, or 32 per cent. of the total attendance. Among these, 2,066 were positive and 2,704 negative. The positive cases were immunized by the toxin antitoxin mixture. Owing to the publicity given to the cases of typhoid poisoning due to the use of the frozen toxin in Massachusetts during the early part of 1923, there was considerable opposition to the Schick test among parents of parochial

school children, so that the testing was discontinued in the spring of the year until the next school assembly.

## NUTRITION CLASSES

During the year some specialized nutrition work was carried out with the co-operation of the New Jersey Tuberculosis League. The work was of a somewhat experimental nature.

In the lower grades of St. James', St. Joseph's, St. Michael's, St. Patrick's and St. Benedict's schools, the children 7 per cent. or more below normal weight, were grouped in special classes. There were about twenty of these in each group, the children spending one day each week in a class room together. All were given minute physical examination by a doctor and co operation was secured with the parents to have the various minor defects corrected, diet regulated, rest periods insisted upon, and light mid meal lunches.

While the period was too short to determine the results gained, a number of the children showed great improvement particularly where defects had been found.

## SCHICK TEST IN PAROCHIAL SCHOOLS

School	Enrollment	Schick Tested	Positive	Negative
St. Michael's	775	399	254	145
St. Patrick's	750	154	47	107
St. Mary's	360	65	33	32
St. Benedict	125	36	11	25
St. Joseph	197			
St. Mary's Fuller	2,147	654	345	309
St. Joseph	1,268	296	98	198
St. Michael's	840	99	52	47
St. Augustine	207			
Our Lady of Good Council	470			
St. Ann, Miss Mawer	2,001	395	150	245

St. James	1,500			
St. Berch	780	18	4	10
St. Aloysius	700			
Holy Trinity	250			
Total, Miss Fahy	2,680	109	40	10
St. Michael	500	94	10	44
St. Lucy	350	204	30	74
St. John	190	45	12	30
Sacred Heart (Park Ave.)	200	50		
St. Francis	200			
Total, Miss Clinton	1,440	393	104	30
St. Columbus	880	141	75	10
St. Casimir	1,450	423	122	30
St. Charles	100			
Blessed Sacrament	900	240	17	8
Total, Mrs. Reck	3,530	754	34	40
St. Ann	480	152	83	10
St. Antoninus	350	141	78	60
St. Peter	520	177	76	10
Sacred Heart (Vailsburgh)	679	150	97	30
Total, Mrs. Sadler	2,029	620	334	20
1924	14,623	2,935	1,296	1,630
1923		1,835	770	1,065
Total on December 31, 1924		4,770	2,066	2,694

Approximately 32½%

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## SCHOOL

SCHOOL	Teeth		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		Cure		Defect		C	
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ANNUAL REPORT

OF THE

Division of Tuberculosis

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# ANNUAL REPORT OF THE Division of Tuberculosis

Charles V. Craster M.D., Health Officer.

DEAR SIR. - I herewith present the report of the Tuberculosis Division for the year 1924. This covers the work accomplished through our clinics, the examinations of food handlers the nurses, physicians and general field activities.

Respectfully,

M. J. FINE, M.D.,  
*Director.*

## TUBERCULOSIS IN 1924

*By M. J. Fine, M.D.*

### MORTALITY AND MORBIDITY

TUBERCULOSIS MORTALITY RATE LOWER THAN EVER  
(Mortality Rate 87.9)

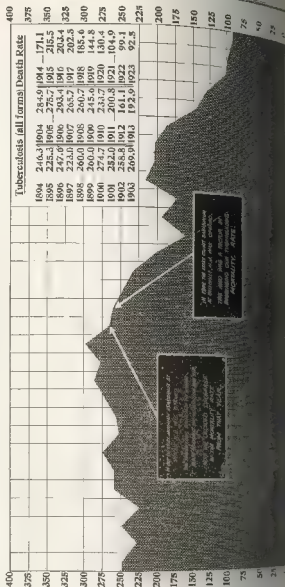
The tuberculosis death rate for 1924 was 87.9 compared with 92.5 in 1923, and marked the ninth consecutive year in which the mortality rate reached a new low point, beginning with a rate of 215.8 ten years ago. This is, indeed, encouraging and remarkable, particularly as the general death rate is becoming more and more stabilized.

With the reduction of mortality there has also been a decrease in morbidity, the number of cases being lower than ever before, not because the physicians failed to report the



# Mortality from Tuberculosis, Newark, N. J. 1924--87.9

(Rate per 100,000 Population)



cases, but simply because there was a decrease in the existing number. Even applications for admission to sanatoria have been less than in previous years. There were 909 reported cases as compared with 1,129 in 1923. This number has continued to drop in spite of the increasing population, the actual number ten years ago in 1915 being 2,146.

Tuberculosis is gradually, one is tempted to say rapidly, ceasing to be "The Great White Plague" of but a few years ago when the present death rates would have been considered impossible of attainment. In attacking this as any other widespread disease problem, health and medical experts must study the factors causing its increase and reduce or eliminate them; and the factors causing its decrease and see that they are developed. Happily the latter condition has been attained.

As in other cities waging an active fight in this respect, this drop has been the result of efficient follow-up work by the tuberculosis staff, periodical examinations including that of street handlers and school children, supervision by nurses, hospital care, sanatorium treatment and training, and the important allied Health Department activities in enforcing sanitary regulations such as anti-spitting, disinfections, proper housing, better laws for ventilation, clean water and milk supplies, forcible removal of careless patients to hospitals, etc.

Reports of the different researches that have been made by scientific bodies, health organizations and hospitals in the last year, lead me to believe that within the very near future, tuberculosis will have far lower mortality and will probably be reduced to almost nothing.

#### SURVEY IN IRONBOUND SECTION

Surveys in various districts of the city always disclose a number of new cases of tuberculosis. In addition, we are

able to check up our old cases and to ascertain the treatment they are receiving and the progress they are making.

Surveys conducted in the Fourteenth Ward and other districts have resulted in finding quite a few cases which had not been reported and which were sent to the proper place for treatment.

Another survey was conducted in the Ironbound district this year. Five nurses were assigned to the work making 11,430 home visits. They made a house-to-house campaign registering all sick cases and attempting to get pulmonary history if possible. Cases that could pay were referred to their private physicians. Others were sent to the City Dispensary for advice and treatment. Due to the congestion and poor sanitation in many sections of this district, we discovered many new cases of tuberculosis.

#### FOLLOW UP OF EX SANATORIA PATIENTS

It has been a too widely accepted belief that a few months in a sanatorium will cure the average tuberculous case, and that if cure does not result, no further hope or improvement can be looked for. No greater fallacy can exist than this for the reason that even in incipient cases improvement is slow, and dependent entirely upon the conduct and resisting power of the patient.

It may further be said that no good results will come from the average treatment of the tuberculous in sanatoria unless there is a sustained and intelligent follow up system. The period spent in a sanatorium may be regarded, with good reason, as a schooling and education in hygiene, and adapting the individual to eventually resuming some useful occupation.

Urgent supervision of sanatoria patients after they have been discharged, with an accurate charting of their condi-

as to whether patient is working, full or part time, loss of work, recurrence of tuberculosis symptoms, gain or loss of weight, following of sanatorium regime, etc., made every three months and reports sent to the Glen Elder and Verona sanatoria. This has been carried out monthly by our department for the past two years.

Through the follow up of the post sanatoria and active cases many patients whose condition may have been aggravated or otherwise, are greatly benefited. The nurse is instructed to instruct the patient and to see that the training while in the institution is carried out while at home. After discharge from the sanatorium, the nurse is to co-operate with the patient's own medical advisor to see that his instructions are properly carried out.

#### FIG. 9. EXAMINATIONS OF PAROCHIAL SCHOOL CHILDREN OF EARLY AND SUSPICIOUS CASES OF TUBERCULOSIS

It is an admitted fact that ninety per cent. of all children with tuberculosis in one form or another and the great majority of acquired tuberculosis in adult life can be traced back to some infection during childhood. We have, therefore, instituted bi weekly periodic examinations of all parochial school children, the general inspection being carried out by the Health Department school nurses. Periodic examinations are made to discover any abnormal condition of the chest special stress being placed upon pulmonary conditions so that immediate attention can be given to those found infected and proper care and supervision provided to enable the child to develop sufficient resistance to become a healthy and useful citizen.

#### HOME VISITS AND FOLLOW UP WORK

During the year, 18,283 home visits were made by our staff of nurses to cases reported by private physicians, am-

bulatory and bed-ridden patients, cases waiting for admission to the sanatoria and others discharged from institutions. This does not include the 11,430 survey visits. A close follow up of these discharged cases has been made and instructions in hygiene, sanitation and domestic science given as to the preparation of food necessary for a tuberculous patient and also to see that the hygiene rules and regulations are carried out to prevent infection of other members of the family. Literature is distributed and members of the families of patients are examined to find if they are free from tuberculosis so as to prevent its development.

The clinic physicians make home visits to bed patients where proper medical attention can be given until they are removed to the sanatorium or hospital.

#### COLORIED MORTALITY, MORBIDITY AND CLINICS

There were 76 deaths among colored people from tuberculosis (all forms) for the year of 1924 making a death rate of 345.5 per 100,000 based upon an estimated colored population of 22,000. This rate is 65.0 points lower than in 1923. The tuberculosis death rate for the entire city for 1924 was 87.9.

The rate among colored people is still a very serious problem, although the mortality and morbidity is gradually declining in the city. There were 148 cases reported this year and 183 in 1923. The decline may be attributed to hygienic training and urgent follow up by the colored men, better housing conditions, and the educational campaign which is going on among the colored population. The greater susceptibility and lack of resistance to tuberculosis among the colored people is probably due to the fact that for a few generations ago, they had no contact with the disease whatever. It is a known fact that constant contact with certain diseases causes the development of natural immunity.

The colored people in our cities are undoubtedly acquiring this type of resistance because of greater contact. This probably is one of the factors aiding in the reduction of mortality among them.

The colored people live in certain sections of the city so that when the nurse instructs one family, the knowledge is usually distributed among other members in the section. The confidence of the colored patient in the nurse and physician of their own race is greater and as a result, the case is well and frequently attended. The co-operation at home with the Health Department is also better.

Colored organizations are actively interested and co-operating in the work of the Health Department. This tends greatly toward better understanding in health matters, disease prevention, and reduction of mortality.

#### ADDITIONAL CLINICS AND CLINICS IN GENERAL

In tuberculosis clinics are attended by less active cases of tuberculosis than ever before. A greater number are sent to be examined, not because they are sick, but to determine if they are free from the disease.

Our clinics in the department are not only tuberculosis clinics but serve as a checking up of the health of the individual with the detection of any abnormal condition in its early stages, thus permitting of early correction and prompt and complete recovery. The cases discovered are sent to the proper clinics and hospitals for observation and treatment.

Total attendance at our clinics in 1924 was 17,669.

A new clinic has been added to the department, in the lower and district. This is accessible to patients living in the neighborhood who can report for examination and

after diagnosis is made of their condition, are directed to the proper sanatoria or hospital for treatment. With the addition of this clinic, there are four health stations in different parts of the city where patients can report for diagnosis who could not come to the central clinic at the City Dispensary.

The Ironbound district clinic which is conducted on Tuesday afternoons from three to four o'clock for adults, and on Saturday mornings from 10 to 11 o'clock for children has been well attended. People who for various reasons cannot get to the City Dispensary, have applied for examination and treatment at this station.

I would also like to mention that the clinic for hay fever and asthma has been well attended during the season of these diseases. We have as many as 14 and 15 polio tests and about 50 tests for asthma. The clinic is open Monday mornings from 10 to 11. The patient is tested and then referred to his private physician for treatment with advice as to the particular reaction.

Even the short-lived chlorine clinic helped in discovering non reported cases of tuberculosis that thought they had ordinary colds but after examination were found to be suffering with tuberculosis. The same applies to the hay fever and asthma clinic conducted by this department.

#### FOOD HANDLERS

This year there were 7,189 food handler examinations made by this division, 1,000 more than last year. Among them we had 796 suspicious cases who returned for re-examination. Of this number 20 were rejected because tuberculosis, four with venereal disease and one typhoid carrier. The number of active cases is gradually decreasing among the food handlers in view of the fact that they are

and that their condition will be discovered when they are examined. Only cases that do not know they have the disease have appeared for examination.

#### HOSPITAL CARE

The accommodation of emergency beds in the Newark City Hospital has helped us a great deal. Many times it is possible to send a patient to the sanatorium due to the fact that he is a far advanced case, or a hemorrhage where immediate hospitalization is necessary. This has been accomplished by the co-operation of the City Hospital where these patients are cared for until they can be sent to the sanatorium. Special wards have been assigned to males and females in the City Hospital to accommodate these emergency cases.

#### SOCIAL PROBLEM

The social problem so closely allied with tuberculosis is also somewhat acute in spite of our excellent strides in reducing the disease itself. In this respect it was indeed disappointing that our Community Chest drive for funds to assist the various charities during 1925 failed to supply a sufficient amount to insure complete contemplated work of the many agencies which co-operate very closely with health workers in aiding the families of those rendered needy by the presence of tuberculosis.

There is great need of legislation assuring some income for the dependents of men or women who must undergo sanatorium treatment. Many such patients decline to stop working because of this and as a result their physical condition becomes aggravated and sooner or later they become totally incapacitated, their wives and children are even more financially distressed, their presence in the home acts as a constant and serious menace to others, and eventually



the community finds itself called upon to support the man, widow and orphans.

#### CONCLUSION

To sum up the situation tuberculosis is being successfully combated, cases are being diagnosed at practically the same rate, making early treatment and cure possible and the death rate is steadily waning. This is not accidental, it is the result of widespread study and persistent work. The enemy is in rapid retreat, which means that every municipality should double their efforts and turn this retreat into a rout and complete elimination and control. This can and must be done. It can only be accomplished by an organized Department of Health which has the power to enforce the necessary laws of hygiene. Increase and extend every activity which experience has shown will assist, whether it be medical, sanitary, social or educational. Early hospital and sanatorium care, better economic conditions, periodic examination of every single man, woman and child, hygiene education better housing conditions and sanitary regulations will eventually eliminate tuberculosis from our midst.

TOTAL DEATHS AND DEATH RATES PER THOUSAND  
AND DEATHS AND DEATH RATES FROM PULMO-  
NARY AND OTHER FORMS OF TUBERCULOSIS  
SINCE 1900

YEAR	Total Deaths	Total Deaths Rate Per M	Total Deaths Pulmonary Tuberc	Death Rate Pulmonary Tuberc. Per M.	Total Deaths All Forms Tuberc.	Death Rate All Forms Tuberc. Per M.
1900	5,006	20.34	603	2.43	676	2.74
1901	4,806	19.26	581	2.32	630	2.52
1902	4,943	19.58	536	2.18	660	2.59
1903	4,925	18.50	666	2.35	778	2.70
1904	5,378	19.77	671	2.39	775	2.84
1905	5,025	17.4	687	2.28	731	2.75
1906	5,551	19.14	685	2.36	831	2.94
1907	5,724	19.80	678	2.28	797	2.65
1908	5,207	17.97	628	2.06	795	2.60
1909	5,520	17.7	596	1.96	764	2.45
1910	5,784	16.94	681	1.96	812	2.40
1911	5,337	15.16	584	1.66	67	2.01
1912	5,471	14.55	506	1.37	596	1.61
1913	5,562	14.63	631	1.66	713	1.93
1914	5,806	14.70	583	1.47	676	1.71
1915	5,389	14.30	687	1.83	808	2.12
1916	6,357	16.50	685	1.7	783	2.03
1917	6,205	15.30	704	1.74	820	2.02
1918	8,483	19.73	683	1.59	768	1.86
1919	5,534	13.57	552	1.26	637	1.45
1920	5,531	13.40	470	1.23	540	1.30
1921	4,774	11.53	392	0.92	446	1.05
1922	5,209	13.06	377	0.87	438	0.99
1923	5,271	11.89	357	0.81	406	0.92
1924	5,111	11.36	346	0.77	392	0.88

## TUBERCULOSIS STATISTICS FOR YEAR 1924

	1924	1923
Number cases reported, white	749	1-2
Number cases reported, colored	148	
Number cases reported, yellow	12	
Total number cases reported	909	1-2
Number deaths white	3.0	
Number deaths colored	70	
Number deaths, yellow	6	
Total number deaths	79	4
Number visits made by division nurses	17 17	
Number investigations made by division nurses	366	
Number visits by survey division nurses	11 4-0	
Total number visits	247 4	3 4
Number children examined at clinic	184	2
Number adults examined at clinics (day)	257	
Number examined at colored clinic	1848	1-2
Number examined at Garside clinic	462	
Number examined at night clinic	273	
Number examined at Waverly clinic	313	4
Number examined at Inboard clinic	210	
Number food handlers examined	7 89	8-2
Number examined for Camp Newark	1832	2-2
Number examined hay fever and asthma clinic	16	
Number examined in chronic clinic	246	
Total number examined at clinics	17 669	17 4-2
Number examined Verona clinic	371	
Number examined at Sibley clinic	15	
Number examined at Glen Gardner clinic	564	17
Number examined at Farmingdale clinic	43	
Total number examined at sanatorium clinics	933	4-2
Number suspicious cases re-examined	704	7-2
Number physicians' visits to homes	158	4-2

## REFERRED TO OTHER DEPARTMENTS FOR ATTENTION

	1924	1923
Disinfecting Division	345	4
Hospitals	228	2-2
Food and Drug Division	31	2
Poor and Alms Department	28	1-2
Jewish Anti-Tuberculosis League	21	

## DEPARTMENT OF HEALTH

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U. S. Veterans Bureau	20	9
General Division	18	44
Sanitary Division	13	16
Police Department	8	25
Hotel Hebrew Charities	5	8
American Red Cross	4	10
Sea Service Bureau	3	5
Chia Hygiene Division	3	2
Tuberculosis League	1	1

## REFERRED BY OTHER ORGANIZATIONS

	1924	1923
State Board of Children's Guardians	55	43
Sea Service Bureau	7	10
Police Department	6	7
U. S. Veterans Bureau	4	6
Tuberculosis League	4	6
American Red Cross	3	7
Hotel Hebrew Charities	2	6
Poor and Alms Department		1

OCCUPATIONS OF REPORTED TUBERCULOSIS  
PATIENTS FOR YEAR 1924

Housework	188	Drivers	
Unemployed	177	Decorators	2
Students	88	Deck hands	2
Laborers	75	Elevator operators	2
Factory hands	42	Expressmen	2
Miners	36	Foremen	2
Foodhandlers	34	Foundry workers	2
Cooks	26	Grinders	2
Salesmen	15	Interpreters	2
Laundry workers	12	Tanners	2
Machinists	8	Teachers	2
Jewelers	8	Watchmen	2
Carpenters	8	Polishers	2
Mechanics	6	Peddlers	2
Nurses	6	Pipefitters	2
Railers	6	Printers	2
Chauffeurs	6	Plumbers	2
Bookkeepers	5	Physicians	2
Electricians	5	Paper hangers	2
Tailors	5	Roofers	2
Hitters	4	Sailors	2
Electricians	4	Stenographers	2
Toolmakers	4	Salesladies	2
Painters	4	Weavers	2
Pharmacists	4	Auto finisher	1
Janitors	3	Apprentice	1
Managers	3	Bookbinder	1
Dressmakers	3	Blacksmith	1
Engineers	3	Butler	1
Bartenders	3	Bush maker	1
Conductors	3	Collector	1
R. R. workers	3	Contractor	1
Shoemakers	3	Driller	1
Inspectors	2	Drape	1
Milliners	2	Lyer	1
Maid	2	Dye cutter	1
Accompanists	2	Draftsman	1
Actors	2	Farmer	1
Agents	2	Golf club maker	1
Gardener	1	Orderly	1

Plumber	1	Plumber's helper	1
For worker	1	Plater	1
Blackster	1	Pressman	1
Hand carrier	1	Plasterer	1
Handresser	1	Real estate dealer	1
Hand carrier	1	Steel worker	1
Insurance agent	1	Secretary	1
Insurance agent	1	Steamfitter	1
Insurance agent	1	Special officer	1
Insurance agent	1	Trunk maker	1
Insurance agent	1	Trackman	1
Insurance agent	1	Textile worker	1
Insurance agent	1	Telephone operator	1
Insurance agent	1	Typist	1
Insurance agent	1	Varnish maker	1
Insurance agent	1	Watch case maker	1

## NATIVITY OF REPORTED CASES 1924

United States	629
Italy	77
Poland	40
Russia	40
Ireland	21
Germany	21
Austria	21
Hungary	15
China	13
Scotland	10
Greece	8
Portugal	6
Lithuania	5
England	4
Turkey	2
Spain	2
Norway	2
Denmark	2
Czech-Slovakia	2
Central America	1
Serbia	1
Canada	1
Yugo-Slavia	1
Ukraine	1
France	1
Mexico	1
Galecia	1

NATIVITY OF REPORTED DEATHS FROM  
TUBERCULOSIS FOR 1924

United States	26
Italy	22
Poland	14
Ireland	11
Hungary	10
Germany	9
Russia	7
Austria	6
Portugal	5
China	5

## DEPARTMENT OF HEALTH

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Lithuania	5
Norland	5
Sweden	5
Finland	4
Latvia	3
Estonia	2
Czechoslovakia	2
Spain	1
Armenia	1
Norway	1
Turkey	1
Vietnam	1
Burma	1
British West Indies	1
Total	392

## CASES REPORTED BY YEARS

1924	917	1918	1,962
1923	1,129	1917	2,097
1922	1,132	1916	2,419
1921	1,247	1915	2,146
1920	1,790	1914	2,117
1919	1,899	1913	1,923
1912	1,783		



TUBERCULOSIS (ASFS REPORTED DURING YEAR 1924 MONTHLY BY SEX, COLOR, AGE

MONTH	Mae		Febr.		White		Black		Yellow		Uncol.		1913		1912		Total.
	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
Jan. 1st	5	26	72	0	1	5	0	9	25	10	10	4	79	88	79	88	
Feb. 1st	60	31	69	10	3	1	1	19	71	15	8	1	87	116	87	116	
Mar. 1st	52	24	3	0	1	3	0	23	9	12	7	1	85	106	85	106	
Apr. 1st	4	43	46	15	1	4	5	14	7	2	5	3	1	92	119	92	119
May 1st	45	52	77	10	1	3	8	4	9	12	18	10	1	82	9	82	9
June 1st	40	42	61	20	1	2	9	5	18	20	15	4	1	74	98	74	98
July 1st	44	91	62	1	1	2	4	9	10	31	11	8	1	6	85	6	85
Aug. 1st	4	20	40	15	1	1	7	1	10	16	10	3	1	1	6	89	6
Sept. 1st	43	31	0	17	1	2	1	7	5	16	14	7	1	6	69	71	69
Oct. 1st	40	23	53	13	1	1	5	3	1	9	17	4	2	1	51	87	51
Nov. 1st	39	23	35	8	1	1	5	6	3	1	6	1	1	1	06	92	06
Dec. 1st	39	27	38	1	1	1	2	3	5	10	18	8	1	1	1	1	1
Total	545	354	729	143	2	8	21	4	60	176	134	245	104	13	18	1	907
Grand Total	6,6	4,5	934	84	12	3	36	44	69	110	173	200	197	127	102	1	1,459

TUBERCULOSIS DEATHS REPORTED DURING 1923 AND 1924 BY WARDS

[illegible]

TIME ELAPSING BETWEEN DATE OF REPORTING  
CASES AND DATE OF DEATH, 1924

	Number	Total	Percentage	Total
After Death				
1 day or less.....	24		6.14	
2 to 3 days.....	10		2.56	
4 to 5 days.....	26		6.65	
6 days or more.....		60		15.35
Preceding Death				
1 year.....	258		65.98	
2 years.....	33		8.44	
3 years.....	12		3.07	
4 years and over.....	28		7.16	
		331		84.65
				100%

One death non-resident—not reportable to Newark)



ANNUAL REPORT

OF THE

Division of Child Hygiene

24. 11.

1.

ANNUAL REPORT  
OF THE  
Division of Child Hygiene

*For Certs. V. Craster, D.P. H., Health Officer.*

SIR: - I herewith present the report of this division  
for the year 1924.

Respectfully submitted,

JULIUS LEVY, M.D.,  
*Director.*

INFANT MORTALITY

1924 presents the lowest infant mortality rate that has  
been reported for the City of Newark, 65.2, with a neo-  
natal mortality rate of 32.3. This represents a reduction  
of 2.8 for infants under one year and 3.7 for infants under  
one month. The deaths under one month in the City as  
a whole represent a higher proportion of the total deaths  
under one year than among the colored, being about one  
fifth of the total deaths under one year for the city and a  
little more than one-third among the colored.

There has been an increase in the infant mortality rate  
among colored infants both for those under one year and  
under one month. In 1922 the colored infant mortality rate  
was 140.8 and the neo-natal mortality rate was 63.8, in 1923  
the colored infant mortality rate was 112.4 and the neo-  
natal mortality was 46.3; in 1924 the colored infant mor-  
tality rate was 129.5 and the neo-natal mortality rate was  
54.

The division has continued to concentrate upon the infants in the first month with some results upon the babies in general but with practically no results among the colored. In 1924 there was a reduction in the neo-natal mortality rate for the city as a whole from 36.0 in 1923 to 32.1 while among the colored the neo-natal mortality rate increased from 40.3 in 1923 to 50.4 in 1924. The deaths under one month are influenced more by prenatal conditions, obstetrical care, the incidence of syphilis, and the immediate attention of the new born baby while deaths over one month and under a year are influenced by the general social, economic, and housing conditions. These conditions obtain in spite of the fact that all colored infants are supervised by nurses. It appears also on a careful analysis that a number of colored infants whose deaths the city is charged were not born in New York but moved here after birth. In the present condition of migration among the colored, these facts must be carefully considered before making any deductions from the infant mortality rates.

Through co-operation with the Midwifery Division of the State Bureau of Child Hygiene and the midwives themselves, we have been receiving within twenty-four hours after birth the name and address of babies delivered by midwives. These cases were reported on the same day by telephone to the nurses in the districts who made immediate visits. One can estimate the completeness of this co-operation by the fact that out of 2,803 midwives' births supervised 2,396 were reported within twenty-four hours. This has enabled the division to insist upon prompt medical attention where it was required and to advise the mother and midwife of the importance of correct methods of care and feeding for premature and immature infants.

This experience with midwives suggests that it should

be possible to obtain twenty-four hours notification of all deaths. A recognition of the fact that approximately one-half of the deaths under one year occur in the first month would make this requirement mandatory, if we would have any marked effect upon this group.

#### CAUSES OF DEATH UNDER ONE YEAR

There were 746 deaths under one year, which is the lowest number that has been listed for any year.

A specially interesting fact in regard to the deaths under one year is that this reduction is to be partly ascribed to the smaller number of deaths from measles, inasmuch as there were four in 1924, fifteen in 1923, and fourteen in 1922.

With the exception of the deaths listed under "early infancy, congenital debility, prematurity" and "all others," there was an increase in the number of deaths. This means an increase in deaths from bronchitis, pneumonia, meningitis, and other contagious diseases. There was a reduction of 20 in the "early infancy, congenital debility, prematurity" group and of 17 among those listed under "all others."

On the other hand, 1924 presents practically the first year in the eleven years that the Child Hygiene Division has been studying this problem that there was no reduction in deaths from diarrhoea.

#### HOW THE INFANT MORTALITY RATE IN NEWARK CAN BE LOWERED

The infant mortality rate for infants that received supervision from birth or before was 27.1. We have included in the deaths for which the division is responsible all babies who died among those to be supervised, even though this



siderable interest to those who urge general hospitalization as the only solution to the general maternal mortality problem.

During 1924 the number of pre-natal clinics has been increased from 4 per week to 5 per week, the new clinic being in co-operation with the Silver Lake Welfare Association. The attendance at the pre-natal clinics has increased from 664 in 1923 to 971 in 1924. 2,338 expectant mothers were under the supervision of the nurses, 338 of whom were referred by hospitals for follow-up. The Division has offered to co-operate with the hospital pre-natal clinics by giving pre-natal supervision in the homes to cases registered at their clinics and by referring to the nearest hospital clinic those cases discovered by our nurses. Beth Israel Hospital, St. Barnabas' Hospital, and the New York City Hospital have been co-operating very actively with this plan.

#### UNMARRIED MOTHERS

1924 presents the largest number of unmarried mothers that have been brought to the notice of the division since 1919, the number being 202, which is almost twice the number that were brought to our notice in 1919.

Thirty seven girls were admitted with their babies to the Convalescent Home during 1924 and five extra babies were admitted for wet nursing. Two of the girls were placed with their babies as wet nurses and 118 quarts of breast milk were distributed to immature and premature infants which netted the girls the sum of \$888.56.

#### CHILD HYGIENE NEEDS OF THE CITY

While it is easy to feel gratified with the results that we are able to report, I would like to emphasize again that in the past five years there has been very little extension made

possible by additional nurses and that today we are still supervising only about 80 per cent. of the cases delivered by midwives and have been unable to place any nurses in the greater parts of Wards 8, 9, 11, 13, 16. It is also necessary to point out that on account of the lack of adequate appropriations the supervision of new-born babies and expectant mothers is still limited to the mothers who are delivered in the wards of hospitals and to those living in the congested districts delivered by midwives. There are a considerable number of mothers who are delivered by doctors in their homes who desire and should receive supervision and instruction from child hygiene nurses.

### STATISTICAL SUMMARY 1924 INFANT MORTALITY RATE

A. Deaths under one year per 1,000 births—	
1 For entire city	65.2
2 For infants supervised by division	27.1
B. Deaths under one month per 1,000 births—	
1 For entire city	32.3
2 For infants of mothers who received pre-natal care from division	18.7
C. Stillbirths per 1,000 living births	
1 For entire city	43.8
2 For infants of mothers who received pre-natal care from division	21.8
D. Puerperal deaths per 1,000 deliveries—	
1 For entire city	7.5
2 For mothers who received pre-natal care from division	.8
E. Total births	11,449
Total deaths under one year	746
Total deaths under one month	370
Total stillbirths	502
Total puerperal deaths	87
Attended by midwives at any time	10
Attended by physicians only	77

## P'ERPERAI DEATHS, 1916-1924

	1916	1917	1918	1919	1920	1921	1922	1923	1924
Total number of p'aperai deaths for entire City	26	29	53	56	76	74	58	52	87
Middlemen in attendance at any time	6	6	10	8	7	10	14	12	10
Rate per 1,000 deliveries for entire City	2.2	2.4	4.5	4.9	6.4	6.3	5.2	4.6	7.5
Rate per 1,000 births attended by midwives	1.0	1.0	1.8	1.5	1.4	2.2	3.7	3.3	4.1
Total number of births for entire City	11,446	11,880	11,601	11,331	11,705	11,705	10,924	11,111	111,449
Total number of births attended by midwives	5,582	5,692	5,338	5,148	4,712	4,470	3,764	3,552	3,261
Percentage of births attended by midwives	48.7%	48.0%	46.0%	45.0%	40.1%	38.1%	34.1%	31.9%	28.5%

## CHART NO. 2

DEATHS UNDER ONE YEAR FOR 1916-1924 BY CAUSES

YEARS	Measles	Bronchitis	Pneumonia	Meningitis	Diarrhoea	Other Contagious Diseases	Early Infancy Congenital Defects Prematurity	All Others	Total
1916	21	55	122	24	196	86	435	85	1,026
1917	0	72	121	26	250	50	430	86	1,035
1918	33	84	156	30	273	83	447	112	1,218
1919	2	42	87	24	244	27	345	90	862
1920	16	57	143	19	191	66	402	100	994
1921	5	38	83	12	178	27	403	91	837
1922	14	44	128	11	153	22	362	88	822
1923	15	32	94	10	105	21	376	103	756
1924	4	34	66	7	125	74	356	86	740
Under One Year	17	51	115	19	180	45	394	93	921

NURSES' ACTIVITIES  
BOARDING HOMES

Number of active licensed homes on December 31, 1924.	43
Requests for boarding homes	64
Children boarded during 1924	122
Other solutions to problem	26
Children in homes at end of year	66
Children taken from homes by parents or agencies	89
Children placed for adoption	2
Sex of children	7
Died in boarding homes	3

The division conducts nine Baby Keep Well Stations, at which are held 17 consultations and conferences weekly, which represents 884 conferences for the year. There are four pre natal clinics a week under the direction and supervision of the division. In addition, pre-natal clinics are held in the following hospitals, with which the nurses of the division co-operate:

Newark Memorial Hospital	Tuesday and Friday, 9 30 A M
St. Barnabas' Hospital	Wednesday, 9 00 A M
St. James' Hospital	Tuesday and Friday 3 30 P M
Beth Israel Hospital	Wednesday, 4 00 P M
Newark City Hospital	Monday and Thursday, 3 30 P M
Newark Maternity Hospital	Tuesday and Friday 9 30 A M

Children of pre-school age are also examined at the Baby Keep Well Stations

## NURSES' ACTIVITIES

	1924	1923	1922	1921	1920	1919
Supervised babies born same year	4,325	4,223	3,265			
Total number of supervised babies	7,765	7,268	5,520	4,553	3,011	3,706
Nurses' visits to homes	45,254	43,308	40,331	37,095	32,591	30,783
Expectant mothers receiving prenatal care	2,338	2,028	1,777	1,684	1,680	1,290
Mothers' visits to consultation stations	8,354	8,173	7,768	6,625	3,963	3,920
Bad housing conditions reported	40	70	204	660	666	448
Contagious diseases reported	65	36	110	82	141	33
Eye Smears taken	71	87	107	55	69	27

## SCHEDULE OF CLINICS

Day	Hour	Station	Clinic
Monday	3:00 P.M.	Oliver St. School	Well Baby
	3:30 P.M.	68 Garside St.	Pre-natal
	3:00 P.M.	136 Van Buren St.	Well Baby
	3:45 P.M.	36 Halsey St.	Well Baby
	3:00 P.M.	Belmont Ave. School	Well Baby
Tuesday	3:00 P.M.	St. Francis Xavier School	Well Baby
	3:30 P.M.	294 Sussex Ave.	Pre-natal
	3:00 P.M.	Camden St. School	Well Baby
	3:00 P.M.	68 Garside St.	Well Baby
	3:00 P.M.	Oliver St. School	Well Baby
Wednesday	3:00 P.M.	Belmont Ave. School	Well Baby
	3:15 P.M.	294 Sussex Ave.	Well Baby
Thursday	10:30 A.M.	128 Belmont Ave. (Silver Lake)	Pre-natal
	11:00 A.M.	305 Halsey St.	Well Baby
	3:00 P.M.	Oliver St. School	Well Baby
	1:30 P.M.	68 Garside St.	Well Baby
	3:00 P.M.	212 Bank St.	Well Baby
	3:15 P.M.	Camden St. School	Well Baby
	3:30 P.M.	136 Van Buren St.	Pre-natal
Friday	3:00 P.M.	136 Van Buren St.	Well Baby-Pre-natal
	3:00 P.M.	68 Garside St.	Well Baby
	3:30 P.M.	Camden St. School	Pre-natal

There were 45,254 visits made by the nurses during the year

## VISITS TO BABY KEEP WELL STATIONS DURING 1924

Oliver St. School	777
St. Francis Xavier (clinic opened in July)	129
Belmont Ave. School	1,530
Van Buren St.	628
Sussex Ave.	635
Camden St. School	635
68 Garside St.	1,124
Halsey St.	1,177
Bank St.	990

## VISITS TO PRE-NATAL CLINICS DURING 1924

Van Buren St.	227
Stark Ave.	72
Garden St. School	320
Wacker St.	327
Silver Lake	14

Clinic opened in September run by Silver Lake Welfare Association with our doctor and nurse in attendance.)

## UNMARRIED MOTHERS

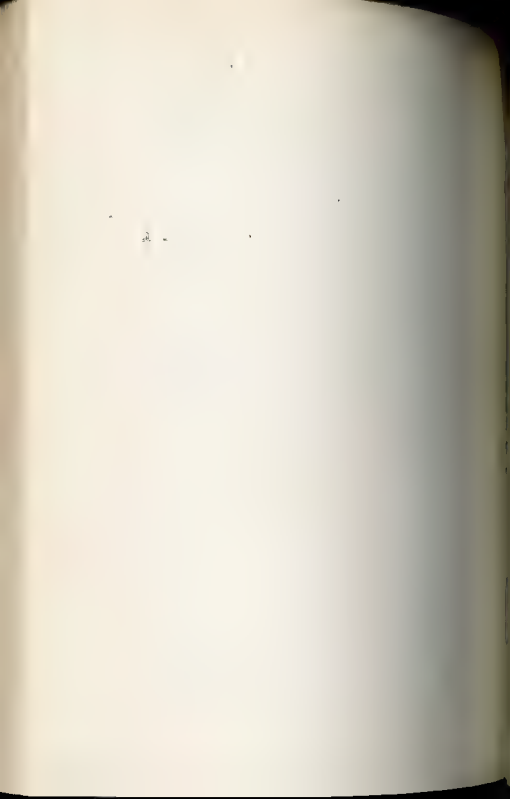
Total number of illegitimate births reported by Vital

Statistics Division	169
Number reported to Division	202
Not supervised	81
Supervised part of year moved	48
Supervised entire year	103
Returned home with babies	111
Not in Convalescent Home	37
Supervised mothers married	7
Still in beds	9
Babies died under 1 month - hospital, 9; home, 2	11
Babies died under 6 months - hospital, 10; home, 5	15
Babies died under 1 year - hospital, 10; home, 7	17
Mothers died in childbirth or within 1 month	0
Babies adopted during year	3
Mothers placed as wet nurses	2



28. 10

## Special Tables of Vital Statistics



*Dr Charles V. Craster, Health Officer*

DEAR SIR:—I hereby submit the Vital Statistics for 1924:

Gross death rate per 1,000 population.....	11.2
Adjusted death rate per 1,000 population.....	10.5
Excluding deaths of non-residents,	
Birth rate per 1,000 population.....	25.7
Deaths under one year per 1,000 births .....	65.2

Respectfully submitted,

ELBERT S. BALL,

*Clerk in Charge of Vital Statistics.*



Disease or Cause	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
Total, All Causes	5,111	4,444	4,778	5,111	4,664	4,555	4,665	4,044	3,055	3,088	3,880	4,133	4,556
Infantile Parvulus	27	1							1	1			5
Typhoid Fever	0												
Malaria	1												
Smallpox	16												
Measles	18												
Scarlet Fever	76												
Whooping Cough	34												
Diphtheria	30												
Influenza	43												
Epidemic	25												
Orchitis	40												
Other Epidemic Diseases	76												
Tuberculosis of Lungs & Consumption	47												
Tuberculosis Meningitis	56												
Other Tuberculosis	90												
Cancer, Malignant Tumor	34												
Simple Meningitis	35												
Apoplexy Softening of the Brain	80												
Organic Heart Disease	163												
Bronchitis	15												
Pneumonia, Lobar	71												
Pneumonia, Bronchial	43												
Other Respiratory Diseases	18												
Diseases of the Stomach (Cancer ex. pte)	12												
Diarrhoeal Diseases (under 5 years)	96												
Appendicitis and Typhoid	170												
Gonorrhea	54												
Gravid Intoxication (Childbirth)	41												
Cerebras of Liver	39												
Bright's Disease and Nephritis	5												
Diseases of Women (not Cancer)	54												
General Septicemia	34												
Other Purulent Diseases	198												
Old Age	60												
Alcoholism	10												
Home Dr.	10												
Unexplained Causes	49												
All other Causes	59												
Totals for Year, 1923	5,421	503	640	565	474	422	405	356	381	339	358	367	441

## DEATHS IN INSTITUTIONS, ETC., FOR 1924

Newark City Hospital	1624
St. Michael's Hospital	216
St. Barnabas' Hospital	76
St. James Hospital	67
Newark Memorial Hospital	101
Beth Israel Hospital	146
Homeopathic Hospital	58
Presbyterian Hospital	52
Newark Private Hospital	17
Lincoln Private Hospital	17
Canton Private Hospital	17
Essex Private Hospital	17
Essex County Isolation Hospital (Newark Residents)	34
Essex Mountain Sanatorium (Newark Residents)	7
Babies Hospital	36
Eye and Ear Hospital	23
Women's and Children's Hospital	2
Newark Maternity Hospital	2
North End Hospital	13
St. Gerard's Hospital	13
East End Hospital	
Dr. Wright's Hospital	4
Dr. Coe's Hospital	5
Home for Aged (Little Sisters of Poor)	26
Home for Incurables	31
Home for Crippled Children	4
Arthur Piney Home	23
Baptist Home	7
Ideal Home for Aged	1
Hebrew Home for Aged	1
House of Good Shepherd	1
St. Mary's Orphanage	1
Dominican Convent	1
Lodging Houses	6
Factories	2
Hotels	5
Ambulance	7
Railroad Station	4
Railroad Bridge	1
Morris Canal	1

Panama River	11
Public Service Terminal	1
Prudential Insurance Co. Building	1
Recreation Park	1
Wash. Freight Yard	1
Centre Market	1
Public Service Corporation Plant	2
Shed	1
Park	1



GENERAL TABLE NO 1, 1924

Deaths from all causes, not including non residents or unknown deaths, by ward, age and sex, including deaths in City Hospital and the Sanatorium at Soho and Vernon New Jersey

AGES	1st Ward										Totals									
	1st Ward	2nd Ward	3rd Ward	4th Ward	5th Ward	6th Ward	7th Ward	8th Ward	9th Ward	10th Ward	11th Ward	12th Ward	13th Ward	14th Ward	15th Ward	16th Ward	17th Ward	18th Ward	19th Ward	20th Ward
Under 1 year	92	4	43	5	78	10	16	10	14	14	42	14	30	54	55	20	16	382		
Males	35	18	28	9	25	10	18	25	9	37	8	8	18	21	27	15	18	305		
Females	57	14	15	3	53	4	8	5	5	7	35	6	12	33	28	5	2	77		
Between 1 and 4—	10	4	13	3	16	5	10	12	8	3	4	4	6	8	13	1	7	141		
Males	14	1	15	3	16	4	8	5	5	0	4	4	6	1	20	5	5	111		
Females	6	3	5	2	5	1	2	3	3	3	5	5	3	7	8	3	2	30		
Between 5 and 9—	7	5	4	4	4	4	4	4	6	2	2	2	4	8	5	3	4	45		
Males	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	38		
Females	3	1	2	2	2	2	2	2	2	2	2	2	2	4	1	1	1	7		
Between 10 and 14	3	1	2	2	3	2	3	3	4	2	2	2	1	2	2	4	2	40		
Males	6	2	8	3	3	5	7	3	5	5	2	2	3	4	9	1	2	56		
Females	3	1	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	20		
Between 15 and 19	3	1	2	2	3	2	3	3	4	2	2	2	1	2	2	4	2	40		
Males	6	2	8	3	3	5	7	3	5	5	2	2	3	4	9	1	2	56		
Females	3	1	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	20		
Between 20 and 24	7	3	8	6	8	6	8	10	8	3	3	4	4	4	6	4	5	68		
Males	7	3	8	6	8	6	8	10	8	3	3	4	4	4	6	4	5	81		
Females	4	4	9	5	6	2	5	6	6	3	5	4	4	4	4	2	4	26		
Between 25 and 29	4	4	9	5	6	2	5	6	6	3	5	4	4	4	4	2	4	26		
Males	4	4	9	5	6	2	5	6	6	3	5	4	4	4	4	2	4	26		
Females	4	4	9	5	6	2	5	6	6	3	5	4	4	4	4	2	4	26		

## GENERAL TABLE No. 1 (1924) Continued

Drawn from all causes not including non-residents or unknown deaths, by weeks, age and sex, including deaths in City Hospital and the Sanatorium at Solon and Verona, New Jersey.

AGES		1st Ward	2nd Ward	3rd Ward	4th Ward	5th Ward	6th Ward	7th Ward	8th Ward	9th Ward	10th Ward	11th Ward	12th Ward	13th Ward	14th Ward	15th Ward	16th Ward	Totals
Between 30 and 34—																		
Males—		4	4	9	5	5	3	3	8	6	3	2	1	12	3	7	2	82
Females—		2	3	11	3	5	5	3	5	4	1	1	9	7	8	7	7	87
Between 35 and 39—																		
Males—		5	8	11	9	13	6	7	15	7	6	6	10	5	13	5	7	139
Females—		9	3	15	4	7	4	6	5	13	8	6	3	7	9	6	5	110
Between 40 and 44—																		
Males—		8	10	21	9	15	6	8	15	7	9	5	8	15	16	5	11	171
Females—		5	7	17	4	6	2	7	8	11	4	7	7	10	10	9	8	122
Between 45 and 49—																		
Males—		9	7	18	13	18	4	6	19	7	8	6	10	11	15	8	15	168
Females—		8	4	9	2	8	5	5	8	9	1	4	4	10	8	5	11	98
Between 50 and 54—																		
Males—		11	15	15	15	18	5	14	6	7	15	10	15	15	1	6	19	201
Females—		8	5	11	1	10	8	3	11	7	6	4	10	12	6	7	15	132
Between 55 and 59—																		
Males—		13	14	11	14	10	14	11	15	20	7	6	9	20	13	1	11	307
Females—		11	4	9	4	5	8	6	18	8	4	7	4	20	14	5	13	140
Between 60 and 64—																		
Males—		11	11	12	15	11	9	8	22	16	6	12	10	17	11	4	14	189
Females—		8	3	12	5	5	15	12	14	25	15	4	12	18	14	7	24	190









# MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX, AGE AND COLOR NORTH WAR, 1924

CAUSE	SEX	Color	Total	Under 15	15 to 24	25 to 34	35 to 44	45 to 54	55 to 64	65 and over	Total
1. All Causes	M	W	120	5	24	9	12	0	45	65	
2. Heart Disease	M	W	120	5	24	9	12	0	45	65	
3. Stroke	M	W	120	5	24	9	12	0	45	65	
4. Cancer	M	W	120	5	24	9	12	0	45	65	
5. Tuberculosis	M	W	120	5	24	9	12	0	45	65	
6. Pneumonia	M	W	120	5	24	9	12	0	45	65	
7. Influenza	M	W	120	5	24	9	12	0	45	65	
8. Measles	M	W	120	5	24	9	12	0	45	65	
9. Diphtheria	M	W	120	5	24	9	12	0	45	65	
10. Scarlet Fever	M	W	120	5	24	9	12	0	45	65	
11. Whooping Cough	M	W	120	5	24	9	12	0	45	65	
12. Typhoid	M	W	120	5	24	9	12	0	45	65	
13. Typhus	M	W	120	5	24	9	12	0	45	65	
14. Cholera	M	W	120	5	24	9	12	0	45	65	
15. Malaria	M	W	120	5	24	9	12	0	45	65	
16. Syphilis	M	W	120	5	24	9	12	0	45	65	
17. Gonorrhea	M	W	120	5	24	9	12	0	45	65	
18. Venereal Disease	M	W	120	5	24	9	12	0	45	65	
19. Erysipelas	M	W	120	5	24	9	12	0	45	65	
20. Tetanus	M	W	120	5	24	9	12	0	45	65	
21. Rabies	M	W	120	5	24	9	12	0	45	65	
22. Smallpox	M	W	120	5	24	9	12	0	45	65	
23. Measles	M	W	120	5	24	9	12	0	45	65	
24. Diphtheria	M	W	120	5	24	9	12	0	45	65	
25. Scarlet Fever	M	W	120	5	24	9	12	0	45	65	
26. Typhoid	M	W	120	5	24	9	12	0	45	65	
27. Typhus	M	W	120	5	24	9	12	0	45	65	
28. Cholera	M	W	120	5	24	9	12	0	45	65	
29. Malaria	M	W	120	5	24	9	12	0	45	65	
30. Syphilis	M	W	120	5	24	9	12	0	45	65	
31. Gonorrhea	M	W	120	5	24	9	12	0	45	65	
32. Venereal Disease	M	W	120	5	24	9	12	0	45	65	
33. Erysipelas	M	W	120	5	24	9	12	0	45	65	
34. Tetanus	M	W	120	5	24	9	12	0	45	65	
35. Rabies	M	W	120	5	24	9	12	0	45	65	
36. Smallpox	M	W	120	5	24	9	12	0	45	65	
37. Measles	M	W	120	5	24	9	12	0	45	65	
38. Diphtheria	M	W	120	5	24	9	12	0	45	65	
39. Scarlet Fever	M	W	120	5	24	9	12	0	45	65	
40. Typhoid	M	W	120	5	24	9	12	0	45	65	
41. Typhus	M	W	120	5	24	9	12	0	45	65	
42. Cholera	M	W	120	5	24	9	12	0	45	65	
43. Malaria	M	W	120	5	24	9	12	0	45	65	
44. Syphilis	M	W	120	5	24	9	12	0	45	65	
45. Gonorrhea	M	W	120	5	24	9	12	0	45	65	
46. Venereal Disease	M	W	120	5	24	9	12	0	45	65	
47. Erysipelas	M	W	120	5	24	9	12	0	45	65	
48. Tetanus	M	W	120	5	24	9	12	0	45	65	
49. Rabies	M	W	120	5	24	9	12	0	45	65	
50. Smallpox	M	W	120	5	24	9	12	0	45	65	
51. Measles	M	W	120	5	24	9	12	0	45	65	
52. Diphtheria	M	W	120	5	24	9	12	0	45	65	
53. Scarlet Fever	M	W	120	5	24	9	12	0	45	65	
54. Typhoid	M	W	120	5	24	9	12	0	45	65	
55. Typhus	M	W	120	5	24	9	12	0	45	65	
56. Cholera	M	W	120	5	24	9	12	0	45	65	
57. Malaria	M	W	120	5	24	9	12	0	45	65	
58. Syphilis	M	W	120	5	24	9	12	0	45	65	
59. Gonorrhea	M	W	120	5	24	9	12	0	45	65	
60. Venereal Disease	M	W	120	5	24	9	12	0	45	65	
61. Erysipelas	M	W	120	5	24	9	12	0	45	65	
62. Tetanus	M	W	120	5	24	9	12	0	45	65	
63. Rabies	M	W	120	5	24	9	12	0	45	65	
64. Smallpox	M	W	120	5	24	9	12	0	45	65	
65. Measles	M	W	120	5	24	9	12	0	45	65	
66. Diphtheria	M	W	120	5	24	9	12	0	45	65	
67. Scarlet Fever	M	W	120	5	24	9	12	0	45	65	
68. Typhoid	M	W	120	5	24	9	12	0	45	65	
69. Typhus	M	W	120	5	24	9	12	0	45	65	
70. Cholera	M	W	120	5	24	9	12	0	45	65	
71. Malaria	M	W	120	5	24	9	12	0	45	65	
72. Syphilis	M	W	120	5	24	9	12	0	45	65	
73. Gonorrhea	M	W	120	5	24	9	12	0	45	65	
74. Venereal Disease	M	W	120	5	24	9	12	0	45	65	
75. Erysipelas	M	W	120	5	24	9	12	0	45	65	
76. Tetanus	M	W	120	5	24	9	12	0	45	65	
77. Rabies	M	W	120	5	24	9	12	0	45	65	
78. Smallpox	M	W	120	5	24	9	12	0	45	65	
79. Measles	M	W	120	5	24	9	12	0	45	65	
80. Diphtheria	M	W	120	5	24	9	12	0	45	65	
81. Scarlet Fever	M	W	120	5	24	9	12	0	45	65	
82. Typhoid	M	W	120	5	24	9	12	0	45	65	
83. Typhus	M	W	120	5	24	9	12	0	45	65	
84. Cholera	M	W	120	5	24	9	12	0	45	65	
85. Malaria	M	W	120	5	24	9	12	0	45	65	
86. Syphilis	M	W	120	5	24	9	12	0	45	65	
87. Gonorrhea	M	W	120	5	24	9	12	0	45	65	
88. Venereal Disease	M	W	120	5	24	9	12	0	45	65	
89. Erysipelas	M	W	120	5	24	9	12	0	45	65	
90. Tetanus	M	W	120	5	24	9	12	0	45	65	
91. Rabies	M	W	120	5	24	9	12	0	45	65	
92. Smallpox	M	W	120	5	24	9	12	0	45	65	
93. Measles	M	W	120	5	24	9	12	0	45	65	
94. Diphtheria	M	W	120	5	24	9	12	0	45	65	
95. Scarlet Fever	M	W	120	5	24	9	12	0	45	65	
96. Typhoid	M	W	120	5	24	9	12	0	45	65	
97. Typhus	M	W	120	5	24	9	12	0	45	65	
98. Cholera	M	W	120	5	24	9	12	0	45	65	
99. Malaria	M	W	120	5	24	9	12	0	45	65	
100. Syphilis	M	W	120	5	24	9	12	0	45	65	







## CAUSES

CAUSES	Year	Col- ored	White	Total	Males	Females	Under 1 year	1 year to 5	5 years to 14	15 to 24	25 to 44	45 to 64	65 and over
TOTAL, All Causes	1	68	169	237	137	99	31	9	5	0	30	65	50
Infectious Diseases			1	1	1							1	
Lymphatic Fever													
Malaria													
Smallpox													
Measles													
Scarlet Fever													
Whooping Cough													
Diphtheria													
Influenza													
Epidemic Meningitis (Cerebro Spinal)													
Other Epidemic Diseases													
Tuberculosis of Lungs, Consumptive													
Tuberculosis of Meninges													
Other Tuberculosis													
Cancer, Malignant Tumor													
Scalp & Meningitis													
Apoplexy—Softening of the Brain													
Organic Heart Disease													
Brucellosis													
Neuritis, Larynx													
Neuritis, Bronchio													
Other Respiratory Diseases													
Diseases of the Stomach (Gastric ex'd)													
Diarrhoea, Diseases of Intestines													
Appendicitis and Typhoid													
Hernia, Intestinal Obstruction													
Cirrhosis of Liver													
Bright's Disease and Nephritis													
Diseases of Women (not Cancer ex'd)													
Puerperal Septicemia													
Other Puerperal Diseases													
Conjunctival Ex'd and Maxillary													
Old Age													
Accident													
Homicide													
Self-de													
Ill-defined Causes													
All Other Causes													

The death rate for the sex, etc. ward was 12.6 per 1,000 (population as against 2.8 for the previous year. The present population of the seventh ward is estimated for these calculations at 16,498.



CAUSES	Yrd	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930
Totals, All Causes	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Infants, Perinatal	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Infants, Postnatal	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Infants, Stillborn	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Infants, Sudden Death	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Infants, Other	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Infants, Total	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Children, Perinatal	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Children, Postnatal	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Children, Stillborn	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Children, Sudden Death	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Children, Other	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Children, Total	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Adults, Perinatal	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Adults, Postnatal	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Adults, Stillborn	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Adults, Sudden Death	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Adults, Other	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
Adults, Total	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149
All Causes	1	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149	149

The death rate for the month was 40.2 per 1,000 of population as against 11.2 for the previous year. The present population of the month ward is estimated for these calculations at 47,335.

MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX, AGE AND COLOR  
TENTH WARD 1924

CAUSES	Ye- low	Col- ored	White	Total	Male	Female	Under 1 and over 14	Under 5 Years	5 to 14	15 to 44	45 to 64	65 and over	
Total A. Cause	32	296	446	180	116	69	14	92	9	3	40	89	47
Infantile Parotid					1								
Typhoid Fever													
Malaria													
Smallpox													
Scarlet Fever													
Dysentery													
Whooping Cough													
Diphtheria													
Lebanza													
Measles, Morbilli, Cerebro, Spinal													
Other Epidemic Diseases													
Tuberculosis of Lungs Consumption													
Tuberculosis Meningitis													
General Tuberculosis													
Cancer, Malignant Tumors													
Simple Meningitis													
Apoplexy Strokes of the Brain													
Gravels Heart Disease													
Phthisis													
Pneumonia													
Other Respiratory Diseases													
Diseases of the Stomach Cancer esophagus													
Diarrhoeal Diseases, enteric fever													
Appendicitis and other													
Hernia Intestinal Obstruction													
Emboli of Liver													
Bruises Burns and Scalds													
Fractures Dislocations													
Puerperal Eclampsia Convulsions													
Other Puerperal Diseases													
Causes for Infancy and Infants													
Old Age													
Accidents													
Violence													
Stomach													
AT Other causes													

Total A. Cause 32 296 446 180 116 69 14 92 9 3 40 89 47

Total All Causes	At 455	At 456	At 457	At 458	At 459	At 460	At 461	At 462	At 463	At 464	At 465	At 466	At 467	At 468	At 469	At 470	At 471	At 472	At 473	At 474	At 475	At 476	At 477	At 478	At 479	At 480	At 481	At 482	At 483	At 484	At 485	At 486	At 487	At 488	At 489	At 490	At 491	At 492	At 493	At 494	At 495	At 496	At 497	At 498	At 499	At 500	At 501	At 502	At 503	At 504	At 505	At 506	At 507	At 508	At 509	At 510	At 511	At 512	At 513	At 514	At 515	At 516	At 517	At 518	At 519	At 520	At 521	At 522	At 523	At 524	At 525	At 526	At 527	At 528	At 529	At 530	At 531	At 532	At 533	At 534	At 535	At 536	At 537	At 538	At 539	At 540	At 541	At 542	At 543	At 544	At 545	At 546	At 547	At 548	At 549	At 550	At 551	At 552	At 553	At 554	At 555	At 556	At 557	At 558	At 559	At 560	At 561	At 562	At 563	At 564	At 565	At 566	At 567	At 568	At 569	At 570	At 571	At 572	At 573	At 574	At 575	At 576	At 577	At 578	At 579	At 580	At 581	At 582	At 583	At 584	At 585	At 586	At 587	At 588	At 589	At 590	At 591	At 592	At 593	At 594	At 595	At 596	At 597	At 598	At 599	At 600	At 601	At 602	At 603	At 604	At 605	At 606	At 607	At 608	At 609	At 610	At 611	At 612	At 613	At 614	At 615	At 616	At 617	At 618	At 619	At 620	At 621	At 622	At 623	At 624	At 625	At 626	At 627	At 628	At 629	At 630	At 631	At 632	At 633	At 634	At 635	At 636	At 637	At 638	At 639	At 640	At 641	At 642	At 643	At 644	At 645	At 646	At 647	At 648	At 649	At 650	At 651	At 652	At 653	At 654	At 655	At 656	At 657	At 658	At 659	At 660	At 661	At 662	At 663	At 664	At 665	At 666	At 667	At 668	At 669	At 670	At 671	At 672	At 673	At 674	At 675	At 676	At 677	At 678	At 679	At 680	At 681	At 682	At 683	At 684	At 685	At 686	At 687	At 688	At 689	At 690	At 691	At 692	At 693	At 694	At 695	At 696	At 697	At 698	At 699	At 700	At 701	At 702	At 703	At 704	At 705	At 706	At 707	At 708	At 709	At 710	At 711	At 712	At 713	At 714	At 715	At 716	At 717	At 718	At 719	At 720	At 721	At 722	At 723	At 724	At 725	At 726	At 727	At 728	At 729	At 730	At 731	At 732	At 733	At 734	At 735	At 736	At 737	At 738	At 739	At 740	At 741	At 742	At 743	At 744	At 745	At 746	At 747	At 748	At 749	At 750	At 751	At 752	At 753	At 754	At 755	At 756	At 757	At 758	At 759	At 760	At 761	At 762	At 763	At 764	At 765	At 766	At 767	At 768	At 769	At 770	At 771	At 772	At 773	At 774	At 775	At 776	At 777	At 778	At 779	At 780	At 781	At 782	At 783	At 784	At 785	At 786	At 787	At 788	At 789	At 790	At 791	At 792	At 793	At 794	At 795	At 796	At 797	At 798	At 799	At 800	At 801	At 802	At 803	At 804	At 805	At 806	At 807	At 808	At 809	At 810	At 811	At 812	At 813	At 814	At 815	At 816	At 817	At 818	At 819	At 820	At 821	At 822	At 823	At 824	At 825	At 826	At 827	At 828	At 829	At 830	At 831	At 832	At 833	At 834	At 835	At 836	At 837	At 838	At 839	At 840	At 841	At 842	At 843	At 844	At 845	At 846	At 847	At 848	At 849	At 850	At 851	At 852	At 853	At 854	At 855	At 856	At 857	At 858	At 859	At 860	At 861	At 862	At 863	At 864	At 865	At 866	At 867	At 868	At 869	At 870	At 871	At 872	At 873	At 874	At 875	At 876	At 877	At 878	At 879	At 880	At 881	At 882	At 883	At 884	At 885	At 886	At 887	At 888	At 889	At 890	At 891	At 892	At 893	At 894	At 895	At 896	At 897	At 898	At 899	At 900	At 901	At 902	At 903	At 904	At 905	At 906	At 907	At 908	At 909	At 910	At 911	At 912	At 913	At 914	At 915	At 916	At 917	At 918	At 919	At 920	At 921	At 922	At 923	At 924	At 925	At 926	At 927	At 928	At 929	At 930	At 931	At 932	At 933	At 934	At 935	At 936	At 937	At 938	At 939	At 940	At 941	At 942	At 943	At 944	At 945	At 946	At 947	At 948	At 949	At 950	At 951	At 952	At 953	At 954	At 955	At 956	At 957	At 958	At 959	At 960	At 961	At 962	At 963	At 964	At 965	At 966	At 967	At 968	At 969	At 970	At 971	At 972	At 973	At 974	At 975	At 976	At 977	At 978	At 979	At 980	At 981	At 982	At 983	At 984	At 985	At 986	At 987	At 988	At 989	At 990	At 991	At 992	At 993	At 994	At 995	At 996	At 997	At 998	At 999	At 1000
Infantile Paralysis	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1																									

MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX, AGE AND COLOR  
TWIFIFTH WARD, 1924

[illegible]





MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX AGE AND COLOR  
FOURTY-EIGHTH YEAR 1924

[illegible]







MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX, AGE AND COLOR  
UNKNOWN ADDRESSES AND UNIDENTIFIED PERSONS 1924

[illegible]

Yel. low	Grav.	White discharge	Ter- mination	Males	Fem- ales	Year	2nd Year	3rd Year	4th Year	5th Year	6th Year	7th Year	8th Year	9th Year	10th Year	11th Year	12th Year	13th Year	14th Year	15th Year	16th Year	17th Year	18th Year	19th Year	20th Year	21st Year	22nd Year	23rd Year	24th Year	25th Year	26th Year	27th Year	28th Year	29th Year	30th Year				
42	42	435	447	188	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	
44	44	450	463	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271
44	44	450	463	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271
44	44	450	463	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271
44	44	450	463	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271
44	44	450	463	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271
44	44	450	463	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271
44	44	450	463	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271
44	44	450	463	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271
44	44	450	463	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271	271
44	44	450	463	271	271																																		

The death rate for the month was 11.7 per 1,000 of population as against 11.2 for the previous month. Estimated for these calculations a 446,000 the death rate for the month of January 1923 was 14.7 estimated population was 430,000.

MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX, AGE AND COLOR  
FEBRUARY, 1924

[illegible]

## CAUSES

Ye  
LowCol  
ored

White

Total  
deaths

Male

Per  
centUnder  
1 Year1 and  
Under  
23 and  
Under  
56 and  
Under  
1415  
to  
2425  
to  
4445  
to  
6465  
and  
overTotal, All Causes—  
Infantile Paralysis  
Typhoid Fever  
Malaria

Scarlet Fever

Measles

Whooping Cough

Diphtheria

Influenza

Endemic Meningitis (Cerebro Spina.)

Other Epidemic Diseases

Tuberculosis of Lungs (Consumption)

Other Tuberculosis

Cancer, Malignant Tumor

Scrupie Meningitis

Apoplexy, Softening of the Brain

Organic Heart Disease

Bronchitis

Pneumonia, Lobar

Pneumonia, Bronchio

Other Respiratory Diseases

Diseases of the Stomach (Cancer excld)

Diseases of the Stomach (under 5 years)

Appendicitis and Typhoid

Hernia, Intestinal Obstruction

Cirrhosis of Liver

Bright's Disease and Nephritis

Diseases of Women (not Cancer)

Puerperia, Septicemia

Other Puerperal Diseases

Congenital Deblity and Malformaton

Old Age

Accident

Homicide

Suicide

All Other Causes

CAUSES	Ye Low	Col ored	White	Total deaths	Male	Per cent	Under 1 Year	1 and Under 2	3 and Under 5	6 and Under 14	15 to 24	25 to 44	45 to 64	65 and over
Total, All Causes—	3	43	47	51	280	77.1	15	20	103	74	24	96	142	121
Infantile Paralysis														
Typhoid Fever														
Malaria														
Scarlet Fever		1		2	1	2		1	2					
Measles			6	6	3	3		1	4					
Whooping Cough			2	2	2	1	1					1		
Diphtheria														
Influenza														
Endemic Meningitis (Cerebro Spina.)														
Other Epidemic Diseases														
Tuberculosis of Lungs (Consumption)	1	3	28	32	24	8		1	1	1	4	17	8	2
Other Tuberculosis														
Cancer, Malignant Tumor			31	34	12	22					1	6	14	13
Scrupie Meningitis														
Apoplexy, Softening of the Brain			36	40	18	22							3	27
Organic Heart Disease	1	8	69	78	44	34			2	3	3	12	31	27
Bronchitis			5	5	3	3								
Pneumonia, Lobar		7	29	36	24	12	2	3	6	1	4	10	13	22
Pneumonia, Bronchio		4	19	23	15	8	11	2	6	19			1	2
Other Respiratory Diseases			8	8	6	2	3						1	1
Diseases of the Stomach (Cancer excld)			4	4	2	1	1						1	1
Diseases of the Stomach (under 5 years)			33	33	2	3							2	3
Appendicitis and Typhoid			9	9	6	3							1	1
Hernia, Intestinal Obstruction		1	3	3	2	1	1							
Cirrhosis of Liver			3	3	2	3							2	2
Bright's Disease and Nephritis			4	4	3	3							1	1
Diseases of Women (not Cancer)	1	2	45	48	24	24	1	2	2	1	2	9	13	14
Puerperia, Septicemia														
Other Puerperal Diseases														
Congenital Deblity and Malformaton		3	3	3	24	12	36		20					1
Old Age														2
Accident		1	1	1	21	1		1	1	7	1		5	
Homicide		1		1	2	1							1	
Suicide			3	3	2	1	1							
All Other Causes		3	77	80	38	42	5	4	12	4	5	20	32	
Totals for March, 1923.	4	41	520	565	398	257	58	24	11	93	37	94	66	56

The death rate for the month was 13.4 per 1,000 of population, as against 12.9 for the previous month. The present population of Newark is estimated for these calculations at 446,000 the death rate for the month of March, 1923, was 15.8 estimate population 439,000.



MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX, AGE AND COLOR  
APRIL, 1924

[illegible]

## DEPARTMENT OF HEALTH

269

CAUSES	Yellow	Cold	White	Total	Male	Female	Under 1 Year	1-4 Years	5-9 Years	10-14 Years	15-19 Years	20-24 Years	25-29 Years	30-34 Years	35-39 Years	40-44 Years	45-49 Years	50-54 Years	55-59 Years	60-64 Years	65-69 Years	70-74 Years	75-79 Years	80-84 Years	85-89 Years	90-94 Years	Over 94 Years
Total All Causes	3	37	415	455	241	214	60	11	13	81	20	33	89	135	16												
Influenza																											
Measles																											
Scarlet Fever																											
Diphtheria																											
Epidemic Meningitis (Cerebro Spinal)																											
Other Epidemic Diseases																											
Tuberculosis of Lungs (Chronic)																											
Tuberculous Meningitis																											
Other Tuberculous																											
Cancer Malignant Tumor																											
Apoplexy—Softening of the Brain																											
Organic Heart Disease																											
Bronchitis																											
Pneumonia, Lobar																											
Pneumonia, Bronchitis																											
Other Respiratory Diseases																											
Stomach and Intestinal Diseases (under 5 years)																											
Appendicitis and Typhilitis																											
Intestinal Obstruction																											
Cancers of Liver																											
Bright's Disease and Nephritis																											
Diseases of Women (not Cancer)																											
Fevers (not Typhoid)																											
Other Febrile Diseases																											
Uncomplicated Liver and Malformation																											
Old Age																											
Unrecorded																											
From 30th																											
Unstable																											
At Other Causes																											
Totals for May, 1923		36	369	405	209	213	61	13	12	86	15	26	65	122	106												

The death rate for this month was 19 per 1,000 of population as against 13.3 for the corresponding month of 1923. The death rate for the month of May, 1923, was 14.5 estimated from report 439,000.

MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX, AGE AND COLOR  
NL, 1-24

CAUSES	Yellow	Colored	White	Total	Male	Female	Under 1 year	1 and 2 under 5	Under 5 years	5 to 14 years	15 to 24 years	25 to 44 years	45 and over
All Causes	1	43	141	185	108	77	53	8	27	14	24	35	109
Infantile Paralysis													
Typhoid Fever													
Malaria													
Smallpox													
Measles													
Scarlet Fever													
Whooping Cough													
Diphtheria													
Enteritis													
Food Poisoning													
Other Disorders of Digestion													
Tracheitis of Lungs (Consumption)													
Tracheitis of Lungs													
Obstructive Diseases of Lungs													
Other Diseases of Lungs													
Consumption													
Other Diseases of Thorax													
Simple Meningitis													
Apoplexy—Softening of the Brain													
Organic Heart Disease													
Brain Abscess													
Brain Tumor, Int.													
Brain Tumor, Exter.													
Other Respiratory Diseases													
Diseases of the Stomach (under 5 years)													
Diseases of the Stomach (over 5 years)													
Appendicitis													
Hernia, Intestine, Obstruction													
Carcinoma of Liver													
Bright's Disease and Nephritis													
Diseases of Women (not Cancer)													
Puerperal Septicemia													
Other Puerperal Diseases													
Obstetrical Palsy and Malformation of Child													
Accident													
Homicide													
Suicide													
Un-defined Causes													
All Other Causes													
Totals for June 1913	1	37	106	144	81	63	53	8	27	14	24	35	109

The death rate per 1,000 of population for the year 1913 was 10.1 for the white population and 14.6 for the colored population. The death rate for the year 1912 was 10.1 for the white population and 14.6 for the colored population.



MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX, AGE AND COLOR  
AUGUST 1924

AUSPS	Yr	Sex	Color	Total	Male	Female	Under 15	15-40	40-65	65-84	85+
1	52	313	565	187	78	109	1	1	1	1	1
2	4	0	0	0	0	0	0	0	0	0	0
3	4	0	0	0	0	0	0	0	0	0	0
4	4	0	0	0	0	0	0	0	0	0	0
5	4	0	0	0	0	0	0	0	0	0	0
6	4	0	0	0	0	0	0	0	0	0	0
7	4	0	0	0	0	0	0	0	0	0	0
8	4	0	0	0	0	0	0	0	0	0	0
9	4	0	0	0	0	0	0	0	0	0	0
10	4	0	0	0	0	0	0	0	0	0	0
11	4	0	0	0	0	0	0	0	0	0	0
12	4	0	0	0	0	0	0	0	0	0	0
13	4	0	0	0	0	0	0	0	0	0	0
14	4	0	0	0	0	0	0	0	0	0	0
15	4	0	0	0	0	0	0	0	0	0	0
16	4	0	0	0	0	0	0	0	0	0	0
17	4	0	0	0	0	0	0	0	0	0	0
18	4	0	0	0	0	0	0	0	0	0	0
19	4	0	0	0	0	0	0	0	0	0	0
20	4	0	0	0	0	0	0	0	0	0	0
21	4	0	0	0	0	0	0	0	0	0	0
22	4	0	0	0	0	0	0	0	0	0	0
23	4	0	0	0	0	0	0	0	0	0	0
24	4	0	0	0	0	0	0	0	0	0	0
25	4	0	0	0	0	0	0	0	0	0	0
26	4	0	0	0	0	0	0	0	0	0	0
27	4	0	0	0	0	0	0	0	0	0	0
28	4	0	0	0	0	0	0	0	0	0	0
29	4	0	0	0	0	0	0	0	0	0	0
30	4	0	0	0	0	0	0	0	0	0	0
31	4	0	0	0	0	0	0	0	0	0	0
32	4	0	0	0	0	0	0	0	0	0	0
33	4	0	0	0	0	0	0	0	0	0	0
34	4	0	0	0	0	0	0	0	0	0	0
35	4	0	0	0	0	0	0	0	0	0	0
36	4	0	0	0	0	0	0	0	0	0	0
37	4	0	0	0	0	0	0	0	0	0	0
38	4	0	0	0	0	0	0	0	0	0	0
39	4	0	0	0	0	0	0	0	0	0	0
40	4	0	0	0	0	0	0	0	0	0	0
41	4	0	0	0	0	0	0	0	0	0	0
42	4	0	0	0	0	0	0	0	0	0	0
43	4	0	0	0	0	0	0	0	0	0	0
44	4	0	0	0	0	0	0	0	0	0	0
45	4	0	0	0	0	0	0	0	0	0	0
46	4	0	0	0	0	0	0	0	0	0	0
47	4	0	0	0	0	0	0	0	0	0	0
48	4	0	0	0	0	0	0	0	0	0	0
49	4	0	0	0	0	0	0	0	0	0	0
50	4	0	0	0	0	0	0	0	0	0	0
51	4	0	0	0	0	0	0	0	0	0	0
52	4	0	0	0	0	0	0	0	0	0	0
53	4	0	0	0	0	0	0	0	0	0	0
54	4	0	0	0	0	0	0	0	0	0	0
55	4	0	0	0	0	0	0	0	0	0	0
56	4	0	0	0	0	0	0	0	0	0	0
57	4	0	0	0	0	0	0	0	0	0	0
58	4	0	0	0	0	0	0	0	0	0	0
59	4	0	0	0	0	0	0	0	0	0	0
60	4	0	0	0	0	0	0	0	0	0	0
61	4	0	0	0	0	0	0	0	0	0	0
62	4	0	0	0	0	0	0	0	0	0	0
63	4	0	0	0	0	0	0	0	0	0	0
64	4	0	0	0	0	0	0	0	0	0	0
65	4	0	0	0	0	0	0	0	0	0	0
66	4	0	0	0	0	0	0	0	0	0	0
67	4	0	0	0	0	0	0	0	0	0	0
68	4	0	0	0	0	0	0	0	0	0	0
69	4	0	0	0	0	0	0	0	0	0	0
70	4	0	0	0	0	0	0	0	0	0	0
71	4	0	0	0	0	0	0	0	0	0	0
72	4	0	0	0	0	0	0	0	0	0	0
73	4	0	0	0	0	0	0	0	0	0	0
74	4	0	0	0	0	0	0	0	0	0	0
75	4	0	0	0	0	0	0	0	0	0	0
76	4	0	0	0	0	0	0	0	0	0	0
77	4	0	0	0	0	0	0	0	0	0	0
78	4	0	0	0	0	0	0	0	0	0	0
79	4	0	0	0	0	0	0	0	0	0	0
80	4	0	0	0	0	0	0	0	0	0	0
81	4	0	0	0	0	0	0	0	0	0	0
82	4	0	0	0	0	0	0	0	0	0	0
83	4	0	0	0	0	0	0	0	0	0	0
84	4	0	0	0	0	0	0	0	0	0	0
85	4	0	0	0	0	0	0	0	0	0	0
86	4	0	0	0	0	0	0	0	0	0	0
87	4	0	0	0	0	0	0	0	0	0	0
88	4	0	0	0	0	0	0	0	0	0	0
89	4	0	0	0	0	0	0	0	0	0	0
90	4	0	0	0	0	0	0	0	0	0	0
91	4	0	0	0	0	0	0	0	0	0	0
92	4	0	0	0	0	0	0	0	0	0	0
93	4	0	0	0	0	0	0	0	0	0	0
94	4	0	0	0	0	0	0	0	0	0	0
95	4	0	0	0	0	0	0	0	0	0	0
96	4	0	0	0	0	0	0	0	0	0	0
97	4	0	0	0	0	0	0	0	0	0	0
98	4	0	0	0	0	0	0	0	0	0	0
99	4	0	0	0	0	0	0	0	0	0	0
100	4	0	0	0	0	0	0	0	0	0	0

Total for August, 1924

The above table shows the principal causes of death by sex, age and color for the month of August, 1924. The figures are based on the reports of the attending physicians and the coroner.

## CAUSES

CAUSES	White	Total	Males	Females	Under 1 Year	1 to 4 Years	5 to 14 Years	15 to 24 Years	25 to 64 Years	65 and Over
Total All Causes	45	468	203	165	70	9	10	95	72	80
Measles	1	1	1							
Scarlet Fever	1	4	5	1	2					
Diphtheria										
Whooping Cough										
Infantile Parotitis										
Epidemic Meningitis	3	2		2						
Other Epidemic Diseases										
Tuberculosis of Lungs (Consumption)	3	27	1	13	1			1		
Tuberculosis of Lungs (Meningitis)	1	1		1						
Other Tuberculosis	1	32	16	16				1		
Cancer, Malignant Tumor										
Simple Meningitis										
Apoplexy—Softening of the Brain										
Organic Heart Disease										
Bronchitis	7	24	13	11						
Pneumonia	4	47	21	26						
Other Respiratory Diseases	1	13	10	3	5	1				
Diseases of the Stomach (Under 5 years)	2	2								
Diarrhoeal Diseases (Under 5 years)	1	6	4	2	2	2	6	1		
Appendicitis and Typhitis	7	30	19	11	19	1				
Hernia, Intestinal Obstruction	2	5	4	1						
Cirrhosis of Liver	3	5	4	1						
Bright's Disease and Nephritis	3	25	15	10	1					
Diseases of Women (not Cancer)	2	1	1							
Puerperal Septicemia	2	2								
Other Puerperal Diseases	4	2	6	0						
Congenital Deformity and Malformation	1	3	1	2						
Old Age	1	15	12	3						
Accident	1	1	1							
Homeicide	3	3	1	2						
Undetermined Causes	5	48	30	18	3	1				
All Other Causes										
Totals for September, 1923	34	419	190	149	53	16	11	15	22	63

Totals for September, 1923

The death rate for the month was 9.6 per 1,000 of population, as against 9.6 for the previous month. The present population of Newark is estimated for those calculations at 446,050 the death rate for the month of September, 1923, was 9.3 estimated population, 459,000.

**MORTALITY FROM PRINCIPAL CAUSES OF DEATH BY SEX, AGE AND COLOR**  
(Continued), 1924

Causes	Col- ored	White	Total	Male	Female	Under 1 Year	Under 5 Years	5 to 14 Years	15 to 24 Years	25 to 44 Years	45 to 64 Years	65 and Over
Total All Causes	40	310	350	195	155	8	5	10	25	64	100	95
Influenza, Paratyphoid, Typhoid Fever												
Measles												
Scarlet Fever												
Whooping Cough												
Diphtheria												
Infectious Diseases												
Epidemic Meningitis, Cerebro Spinal												
Other Infectious Diseases												
Tuberculosis of Lungs (Consumption)												
Tuberculosis of Other Organs												
Cancer, Malignant Tumors												
Simple Meningitis												
Apothecary—Softening of the Brain												
Organic Heart Disease												
Brucellosis												
Leptospirosis												
Pneumonia, Bronchitis												
Other Respiratory Diseases												
Diseases of the Stomach (Gastric and Duodenal)												
Diseases of the Small Intestine												
Appendicitis and Typhoid												
Hepatitis, Infectious												
Diseases of Liver												
Bright's Disease and Nephritis												
Diseases of Women, such as Cancer, Prolapse of Uterus, etc.												
Chronic Intestinal Diseases												
Chronic Diseases of the Kidneys												
Old Age												
Accident												
Homicide												
Suicide												
Undetermined Causes												
All Other Causes												
Totals for the year, 1924	40	310	350	195	155	8	5	10	25	64	100	95

The death rate for the month was 10.0 per 1,000 of population as against 9.5 for the previous month. The percentage of population under 5 years of age was 14.3, as against 14.1 for the previous month.

Cause	Vd low	C. aged	White	Total deaths	Males	Females	Under 15		15 to 64		65 and over	
							Per 1000	Under 15	Per 1000	15 to 64	Per 1000	65 and over
TOTAL ALL CAUSES	1	37	375	413	23	183	6	8	14	24	78	89
Infectious Diseases												
Typhoid Fever												
Typhus												
Malaria												
Smallpox												
Measles												
Scarlet Fever												
Whooping Cough												
Diphtheria												
Influenza												
Epidemic												
Other Epidemic Diseases												
Tuberculosis of Lungs (Consumption)												
Tuberculosis of Meningitis												
Other Tuberculosis												
Cancer, Malignant												
Cervix												
Stomach												
Colon												
Rectum												
Bladder												
Prostate												
Pancreas												
Liver												
Lung												
Other Respiratory												
Stomach												
Duodenum												
Small Intestine												
Large Intestine												
Rectum												
Bladder												
Prostate												
Pancreas												
Liver												
Lung												
Other Respiratory												
Stomach												
Duodenum												
Small Intestine												
Large Intestine												
Rectum												
Bladder												
Prostate												
Pancreas												
Liver												
Lung												
Other Respiratory												
Stomach					</							

The death rate for the month was 30.5 per 1,000 of population as against 19.0 for the previous year. The present population of Newark is estimated for these circumstances at 446,000 the death rate for the month of November, 1923, was 16.0 estimated population, 439,000.



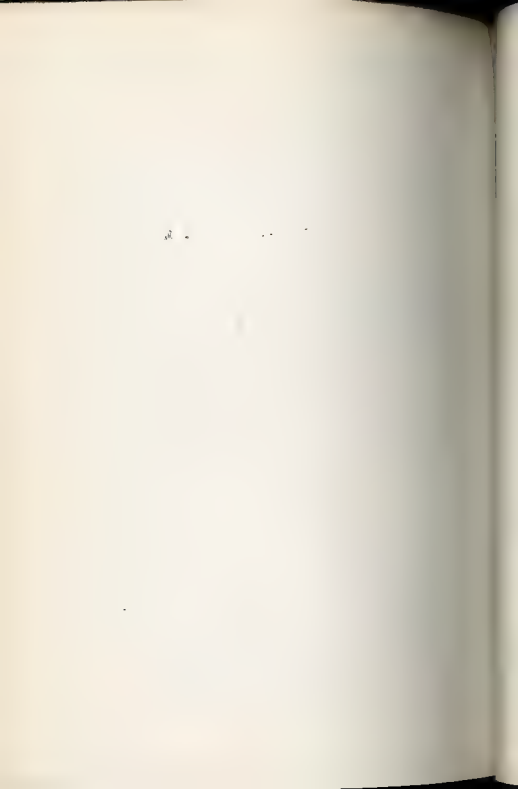


# Mortality Statistic of Newark

FOR THE YEAR 1924

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INCLUDING NON RESIDENT DEATHS ARRANGED TO  
GIVE DISEASE, AGE AND SEX, ACCORDING TO IN-  
TERNATIONAL CLASSIFICATION, COMPILED BY  
THE DIVISION OF VITAL STATISTICS, DE-  
PARTMENT OF HEALTH, NEWARK, N. J.



MALE MORTALITY FIGURES FOR NEWARK FOR YEAR 1924

fire and other resident deaths, arranged to give a view of the fire and its class.

[illegible]

MALE MORTALITY FIGURES FOR NEWARK FOR YEAR 1924 *Continued*

CAUSES OF DEATH	All Ages	Un- der 1	2	3	4	To- tal		5	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85	90
						Under 5	5 and over																		
Epidemic, Endemic and Infestious Diseases—	Total	360																							
Typhoid Fever	11	1																							
Malaria	9	1	7																						
Measles	6			1																					
Scarlet Fever	6		2																						
Whooping Cough	20	2	4	1																					
Diphtheria	18	1	8	1	3	16	2																		
Influenza	11	1	1			3						1			2					2					
Erysipelas	3					3																			
Lethargic Encephalitis	5					2	1						2				1	1							
Meningococcus Meningitis	4	1				1																			
Varicella	1		1																						
Rabies	1																								
Tetanus	1																								
Tuberculosis—All Forms	248	4		3																					
Tuberculosis of Lungs	24	1	1			2	1	3	9	23	1	27	23	40	25	50	75	40	7	8	3				
Tuberculosis of the Meninges	9	1				3	2	1						2	26	29	27	22	6	7	8	3			
Tuberculosis of Intestines and Peritoneum	5	1													1		3	2	1						
Tuberculosis of the Vertebral Column	4																								
Tuberculosis of Other Organs	4																								









MALE MORTALITY FIGURES FOR NEWARK FOR YEAR 1924-Continued

[illegible]



MAIL MORTALITY FIGURES FOR NEWARK FOR YEAR 1924

[illegible]

MALE MORTALITY FIGURES FOR NEWARK FOR YEAR 1941—continued

[illegible]



## FEMALE MORTALITY FIGURES FOR NEWARK FOR YEAR 1924

Including non-resident deaths, arranged to give disease and age according to International Classification

CAUSES OF DEATH		U.	1	2	3	4	To- tal	5	10	5	20	30	45	50	55	60	65	70	75	80	85	90	95	100
All	Age																							
Mortality from A. Causa																								
Epid. m. Malignant and Infectious Diseases																								
General Diseases																								
Nervous System and Organs of Special Senses																								
Diseases of Circulatory System																								
Diseases of Respiratory System																								
Diseases of Digestive System																								
Non-Venereal Diseases Gen. Organs																								
System																								
The Puerperal State																								
Diseases of Skin and Cellular Tissues																								
Diseases of Bones and Organs of Locomotion																								
Malformations																								
Early Infancy																								
Old Age																								
Sexual Causes																								
Suicide																								
Accidents																								
Homicides																								



FEMALE MORTALITY FIGURES FOR NEWARK FOR YEAR 1924, continued

CAUSES OF DEATH	Un- der Age	1	2	3	4	To- tal in- der	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64	65 to 69	70 to 74	75 to 79	80 to 84	85 to 89	90 and over
Syphilis	9	0				0		1				2				1								
Purpura Septicæmia	6	1				2																		
General Diseases																								
Cancer All Forms	339	4	3	2		9	2		1	6	3	1	21	26	28	38	4	51	30	28	15	8		1
Cancer of Breast, Larynx	226	2				2		1		1	2	8	14	20	23	26		39	25	20	8	8		1
Cancer of Stomach	69									1		2	2	4	2	7	8	2	7	7	6	3		1
Cancer of Peritoneum	93											1	1	1	3	7	6	5	3	5	2			
Cancer of the Female Gen. Organs	46										1	2	5	2	10	4	8	6	6	5	2			
Cancer of Breast	29											1	1	2	4	5	4	5	2	1				
Cancer of Skin	5					1																		
Cancer at Other Organs	42	1				1					1	2	6	9	4	5	3	4	6	1	1	1		
Tubercle	4											1	1											
Acute Rheumatism	9					1										1	2							
Rickets	1																							
Diabetes Mellitus	48					1																		
Pernicious Anæmia	23																							
Exophthalmic Goiter	9					2						2		2	2	4	8	12	6	3				
Other Diseases of Thyroid Gland	3									1														
Diseases of the Adrenals	2									1														
Leukæmia	1					2																		
Other General Diseases	4	1				2											1			1	1			



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FEMALE MORTALITY FIGURES FOR NEWARK FOR YEAR 1924--(continued)

[illegible]

FEMALE MORTALITY FIGURES FOR NI-WARK FOR YEAR 1924 (continued)

[illegible]

MALE MORTALITY FIGURES FOR NEWARK FOR YEAR 1924—(Continued)

[illegible]

FEMALE MORTALITY FIGURES FOR NEWARK FOR YEAR 1924 *Continued*

CAUSES OF DEATH	All Ages	Un- der 1	1	2	3	4	To Jan dec	5	10 to 9	15 to 14	20 to 19	25 to 24	30 to 29	35 to 34	40 to 39	45 to 44	50 to 49	55 to 54	60 to 59	65 to 64	70 to 69	75 to 74	80 to 79	85 to 84	90 and over
Street Cars	3							1																	
Automobile	28	1					3	6	4																
Starvation	2						1																		
<b>Homicides</b>	<b>Total</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>4</b>		<b>1</b>	<b>1</b>								<b>2</b>	<b>2</b>	<b>1</b>	<b>3</b>	<b>1</b>			
Fragaria	4																								
Homocide by Other Means	4																								
Fracture Cause not Specified	1																								
Other External Violence	1																								
<b>Ill-Defined Diseases</b>	<b>Total</b>	<b>4</b>	<b>1</b>				<b>5</b>				<b>1</b>	<b>1</b>		<b>2</b>	<b>1</b>								<b>1</b>	<b>1</b>	
<b>Ill-Defined Causes</b>	<b>Total</b>	<b>4</b>	<b>1</b>				<b>5</b>				<b>1</b>	<b>1</b>		<b>2</b>	<b>1</b>								<b>1</b>	<b>1</b>	













# FINANCIAL REPORT FOR YEAR 1924

## RECEIPTS

	Tax Appropria- tion	Actual Receipts	Arrears from 1923	From Savings Fund	From Savings Fund	From Savings Fund	From Savings Fund	From Savings Fund	From Savings Fund	From Savings Fund	From Savings Fund	From Savings Fund	From Savings Fund
City Commission	\$150,000.00												
Sanitary Division		\$ 65.30			\$1,637.00	\$1,500.00	\$1,548.00					\$1,738.00	\$15,000.00
Food and Drug Division								\$6,775.00	\$1,946.00				\$ 50.00
Public Health Division												\$65.00	\$ 443.00
Sanitation Division													
Total	\$150,000.00	\$ 65.30	\$10.00	\$1,647.00	\$1,500.00	\$1,548.00	\$1,548.00	\$6,775.00	\$1,946.00	\$65.00	\$1,738.00	\$1,738.00	\$15,000.00

## DISBURSEMENTS

	Salaries	Light and Heat	Purchase of Supplies	Engine Repairs	Printing and Postage	Travel Expenses	Salaries of Employees	Salaries of Employees	Salaries of Employees	Salaries of Employees	Salaries of Employees	Salaries of Employees	Total
Adm. Division	\$ 32,038.93	\$3,970.00	\$ 32.76	\$ 638.59	\$1,741.62	\$ 30.65	\$ 3,000.00	\$ 3,000.00	\$ 3,000.00	\$ 3,000.00	\$ 3,000.00	\$ 3,000.00	\$18,111.77
Sanitary Division	61,889.16				13.08	24.33							61,926.57
Food and Drug Division	25,414.59				13.08	24.33							25,461.08
Public Health Division	21,613.31		263.89	18.21	555.84	456.33							22,427.58
Sanitation Division	45,009.61				555.84	456.33							46,021.78
City Commission	4,111.06				255.88	217.68							4,584.62
City Commission	35,035.18			445.00	651.09	186.88	9.97						36,327.12
City Commission	3,558.20												3,558.20
City Commission	8,889.00				50.67	234.81							9,174.48
City Commission	8,405.00				80.00	18.72							8,503.72
Total	\$395,824.45	\$5,883.13	\$ 676.00	\$2,000.00	\$5,813.40	\$1,033.22	\$ 3,000.00	\$ 3,000.00	\$ 3,000.00	\$ 3,000.00	\$ 3,000.00	\$ 3,000.00	\$330,194.00

\* Includes \$ 108.40 for City Commission Division

† Includes \$ 109.83 for Sanitation Division

‡ Includes \$ 100.00 for City Commission Division





